Child Care Statewide Administration on Web (CSAW)

User Guide: Program Integrity Enforcement System (PIES)

February 2016

Division of Early Care and Education

DCF-P-445 (R. 02/2016)

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Introduction

The Program Integrity Enforcement System (PIES) automates the client and provider payment adjustment calculations. Previously, the child care payment adjustment calculations were completed manually creating a large workload for local agencies.

PIES is a tool that helps to calculate over and under payments. The system does not change the authorization, payment rate, eligibility, or previously recorded attendance information in the system.

In PIES, you will enter the correct values for parameters to determine whether there is an overpayment or underpayment. Based on these parameters the system will calculate what the issuance should have been and will generate positive or negative adjustment calculations. The worker can review these adjustment calculations.

In PIES, there are two types of Payment Adjustments Requests which are used to make corrections:

- Client Payment Adjustments Requests
  - Allows changing income and Assistance Group (AG) size for a period of time.
  - Allows collecting all payments for an ineligible child for a period of time.
  - Allows changing authorization details for each week within a period of time.

- Provider Payment Adjustments Requests
  - Allows changing provider price for a particular period of time.
  - Allows marking a license/certification as invalid for a period of time so that all payments against that license/certification can be collected.
  - Allows collecting all payments for ineligible children for a period of time.
  - Allows changing authorization and attendance details for each week within a period of time.

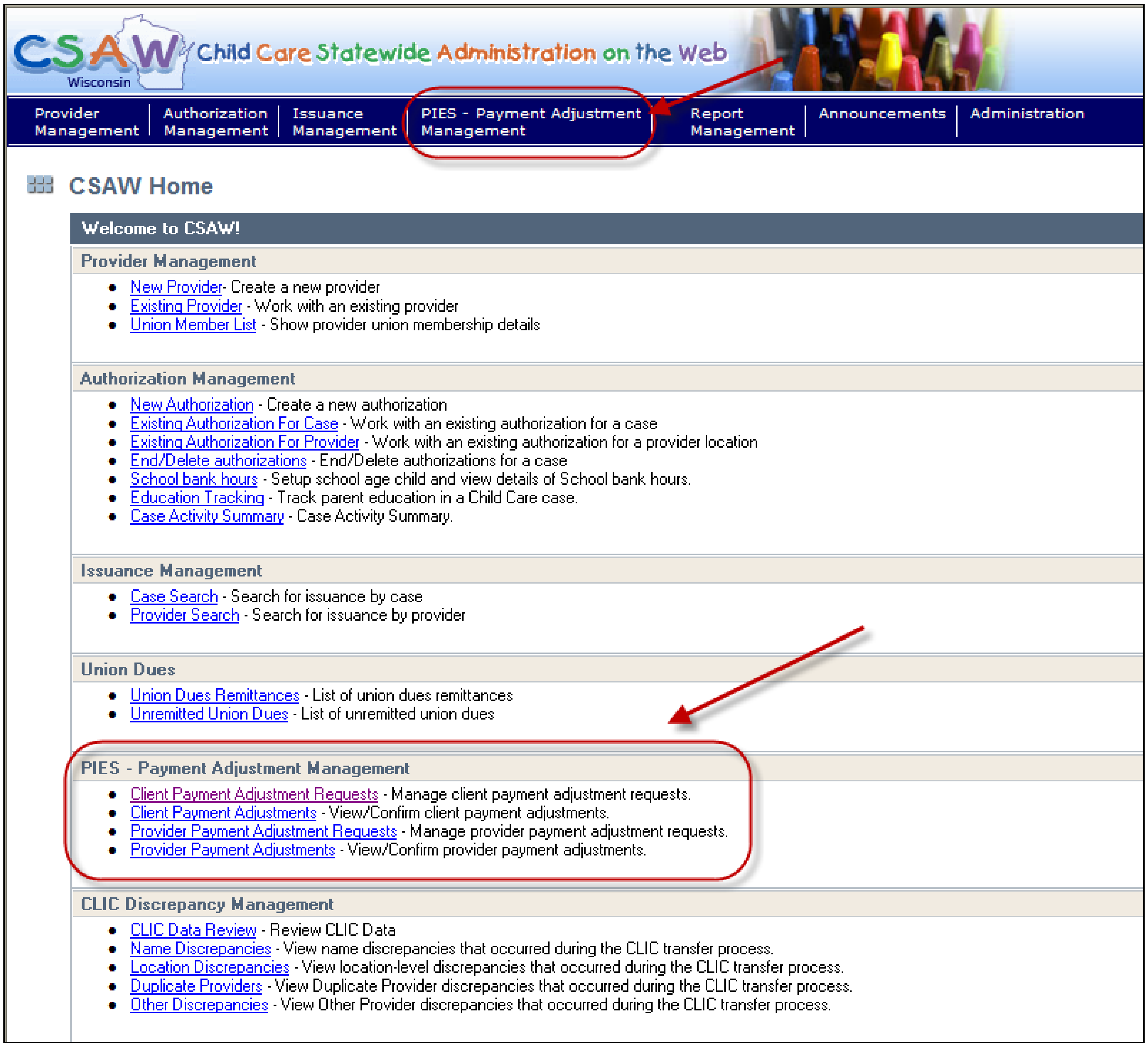
- Once all corrections are made for a particular period, the work should change the status of payment adjustment requests to *Complete* so that the nightly batch process will pick up the request for calculation.

- Nightly batch process will process all requests which are in Completed status and create adjustment calculations for a case and/or provider depending on the type of request. The request status will be updated by PIES to Calculated.

- The worker can review the adjustment amounts and take the required action – confirm calculated adjustments, manually enter a positive or negative adjustment for a provider in CSAW or enter a claim against a client in the benefit recovery subsystem.

Accessing PIES – Payment Adjustment Management

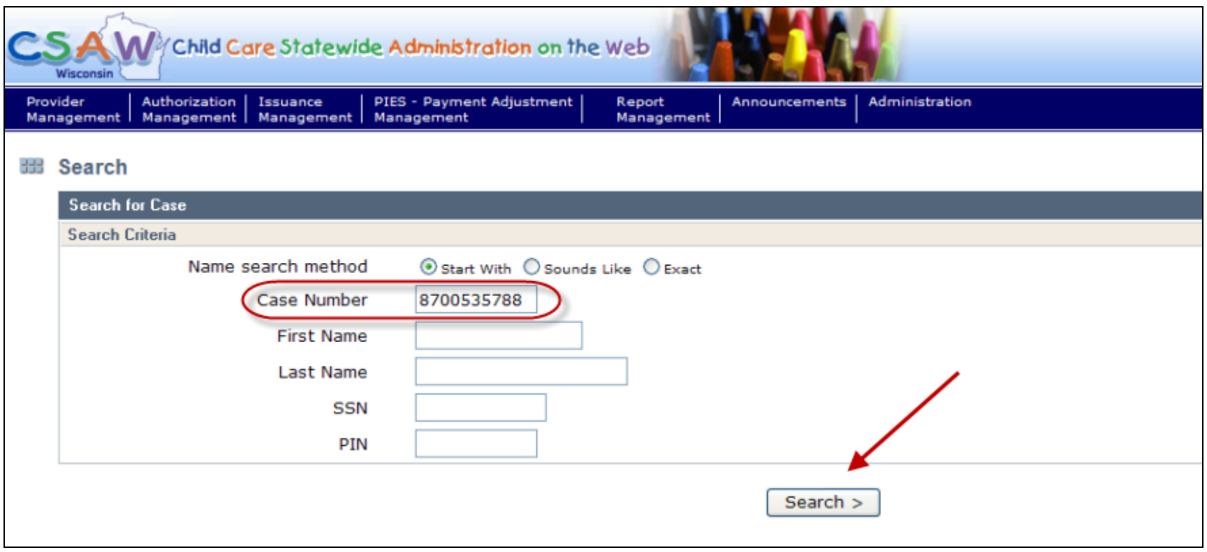
On the **CSAW** home page; click on the **PIES – Payment Adjustment Management** link or on the specific **Client** or **Provider** links below the **PIES – Payment Adjustment Management** heading.



Client Related Adjustments

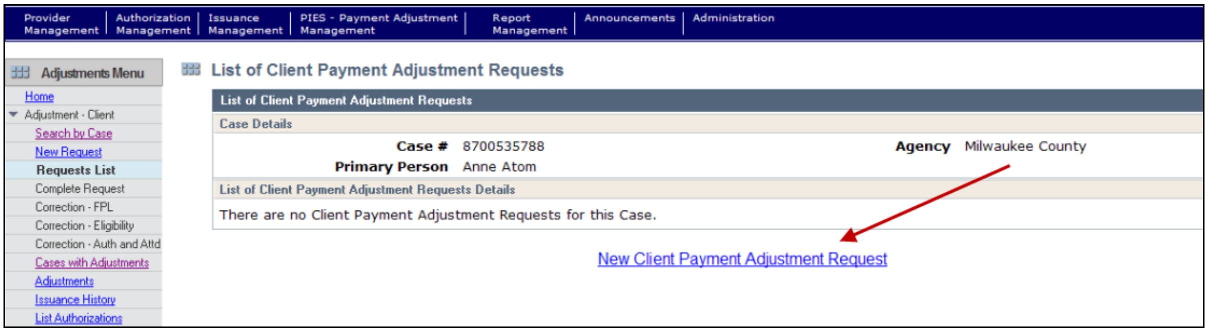
For client related adjustments, click on Client Payment Adjustments Requests link.

Search for a case by using the Case Number, SSN or PIN. There are no required entries on this page, so you may search using the details that are available.

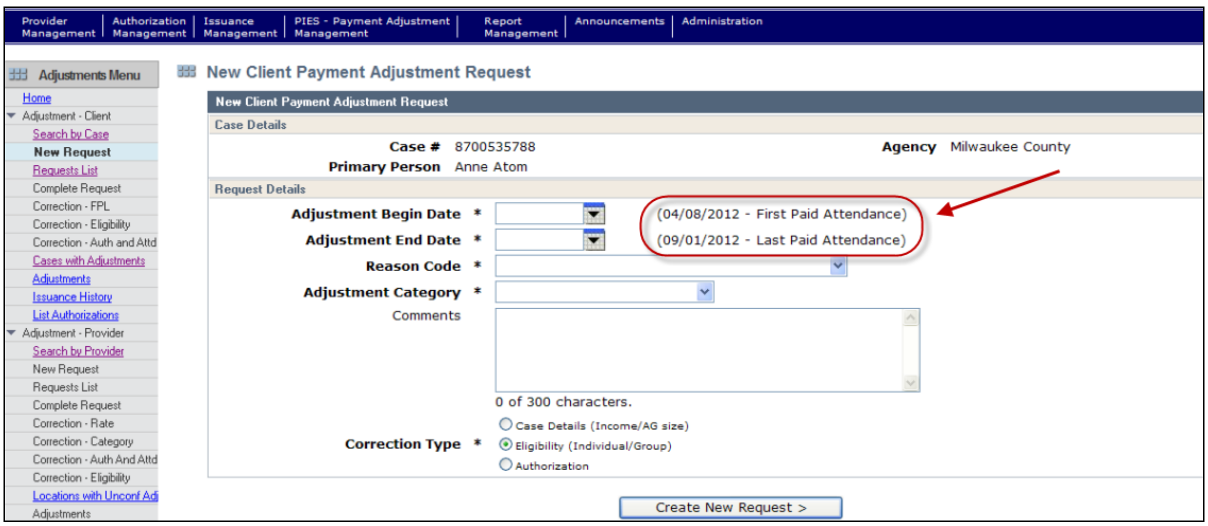


The **List of Client Payment Adjustments Requests** page shows the case details as well as all client payment adjustment requests for the client (if any).

To start a new adjustment request, click on the **New Client Payment Adjustment Request**.



The **New Client Payment Adjustment Request** page shows the “First Paid Attendance” and the “Last Paid Attendance” listed on the page. Payment Adjustments can only be made between (and including) these dates.



Prior to calculating a client overpayment, you will need to know if the overpayment was due to incorrect reporting of income, AG size, eligibility details, or authorization.

Client Overpayment When a Child Was Not Eligible

In the example below, the client failed to timely report the child was out of the home and therefore was not eligible for child care during this period.

STEP 1 – Enter the following information on the **New Client Payment Adjustment Request** screen.

1. **Adjustment Time Frame**
   - Adjustment Begin Date **–** the Sunday of the first attendance week when the child was not eligible for child care.
   - Adjustment End Date – the Saturday of the last attendance week when the child was not eligible for child care.

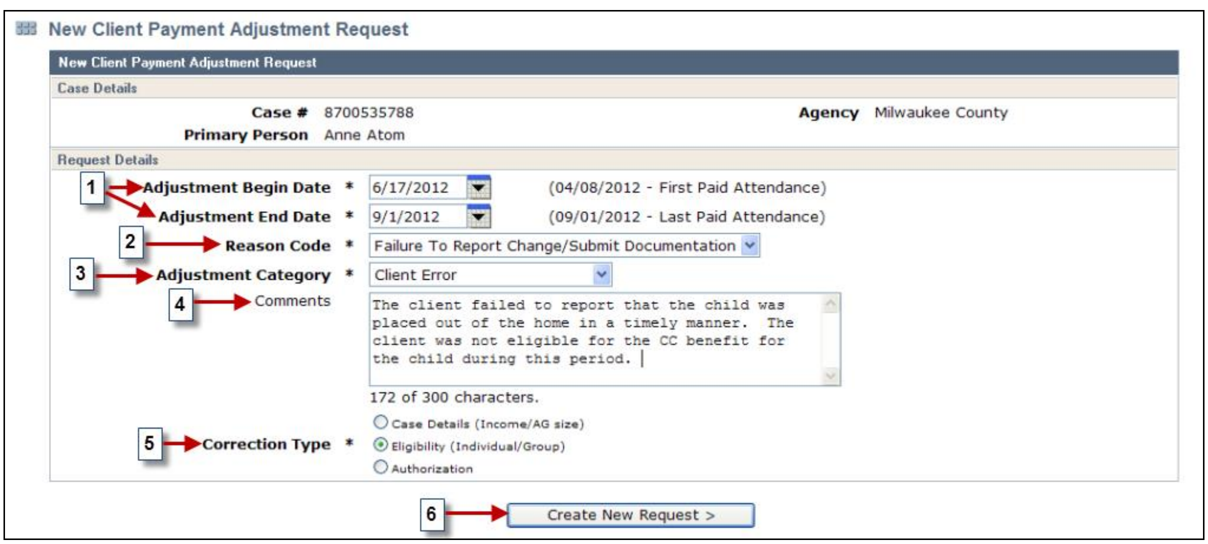
2. **Reason Code –** select the reason for which the child was marked not eligible during the period.

3. **Adjustment Category** – indicates whether the overpayment is the result of an agency error, client error or an intentional violation.
   - Agency Error
   - Client Error
   - Intentional Program Violation

4. **Comments** – Describe the situation that resulted in the payment adjustment.

5. **Correction Type** – Select the radio button that best fits the situation. In this example it is **Eligibility (Individual/Group).**

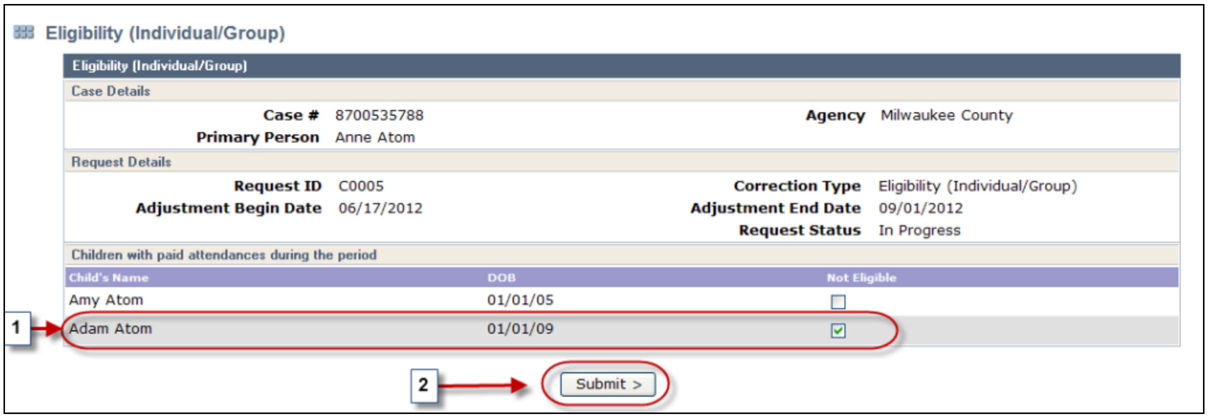
6. **Select** Create New Request.



Eligibility (Individual/Group) – In this example we have selected "Eligibility" as the correction type. This page lists all children on the case during the payment adjustment period for whom a payment had been made.

STEP 2

1. Check the box for the child or children not eligible during this period.
2. Select Submit.

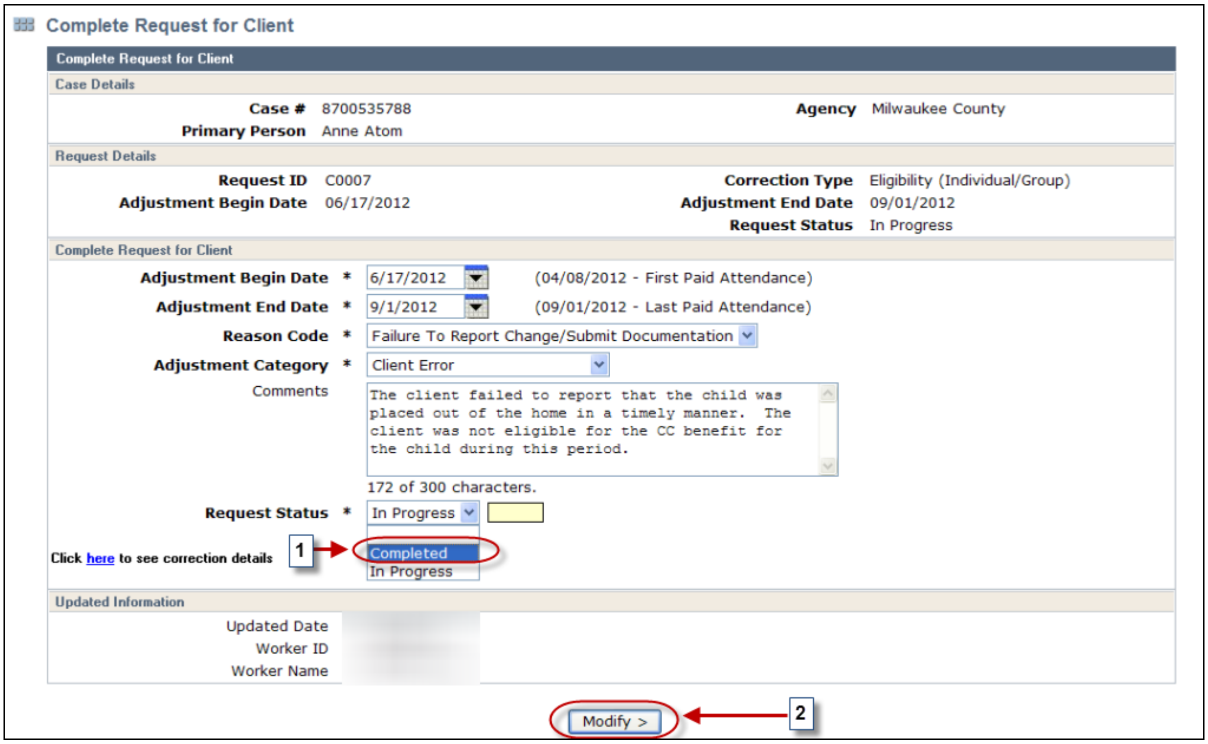


STEP 3 – Change the adjustment request on the **List of Client Payment Adjustment Requests** screen. The current status is In Progress and needs to be changed to Complete by selecting the edit icon (pencil).

Mark as Completed for Overnight Processing

STEP 4

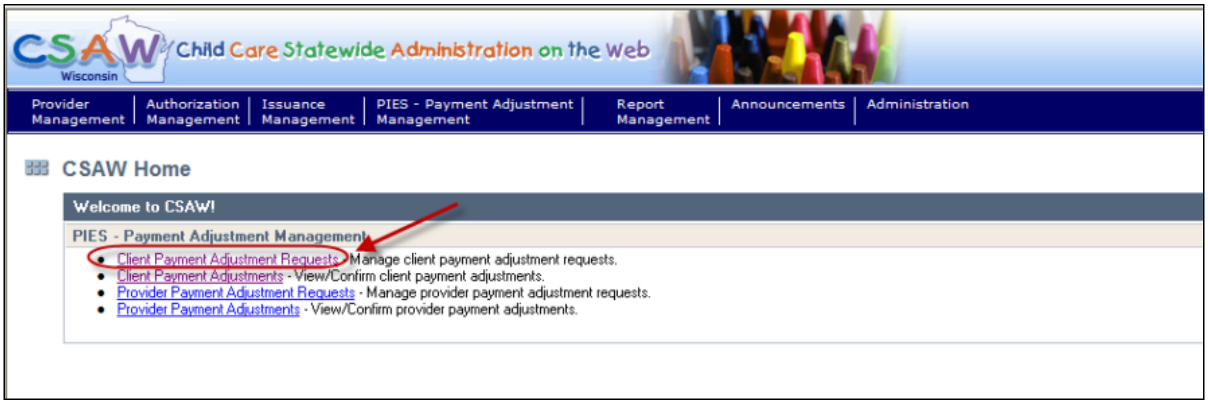
1. Change the Request Status to Completed.
2. Select Modify to submit the status change.



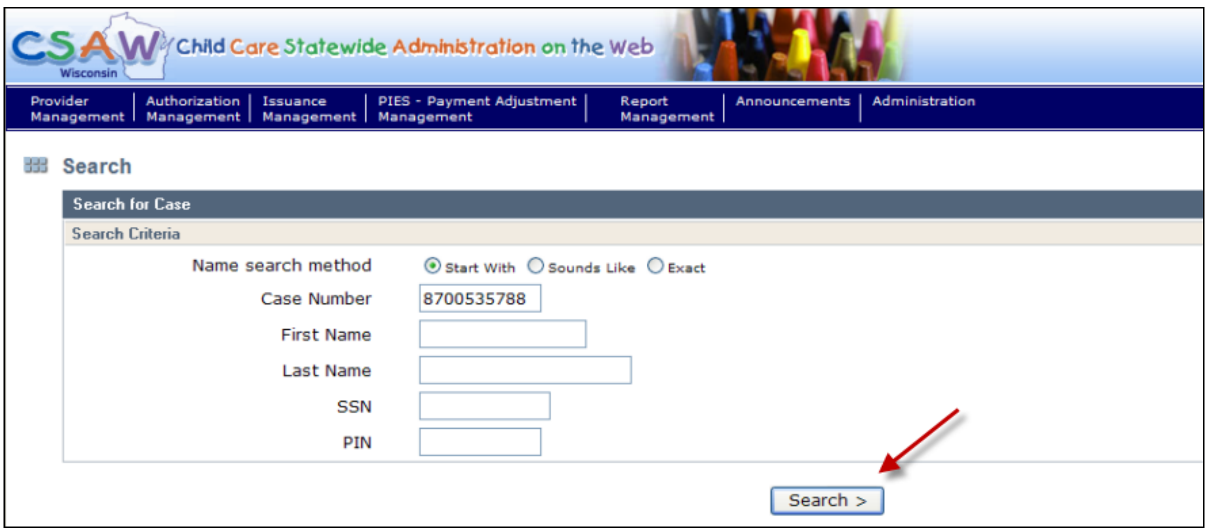
STEP 5 – The completed request will process overnight.

The Next Day: What to Process

STEP 6 – The next day, select the **Client Payment Adjustment Requests** link.



STEP 7 – Search by Case, SSN, or PIN number and select Search'.

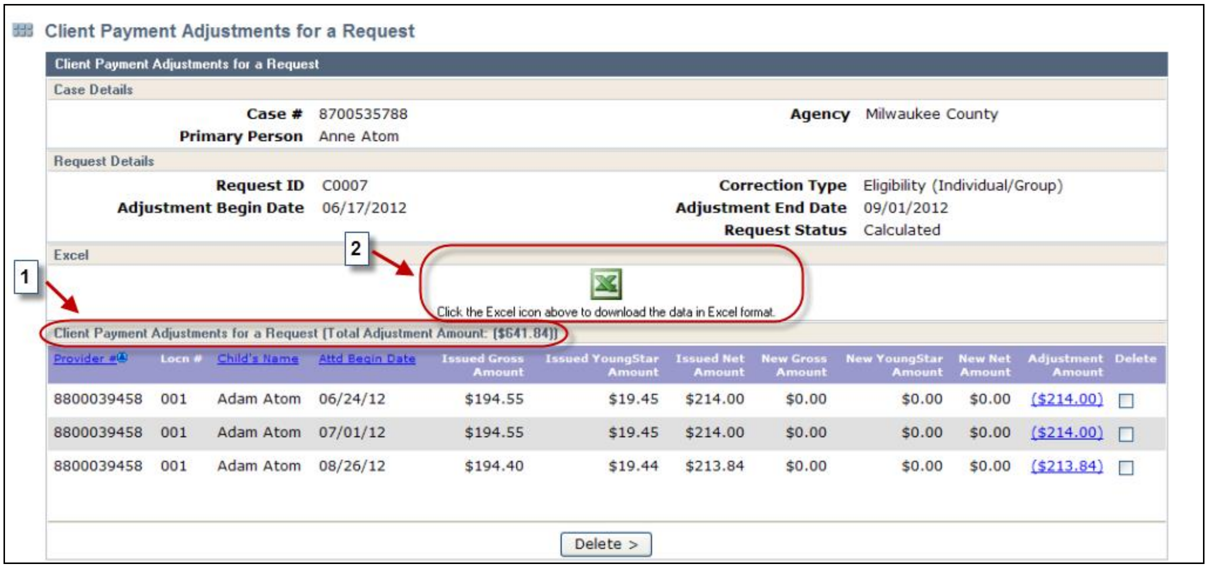


STEP 8 – View the calculated adjustments by clicking on Adjustments.

The **Client Payment Adjustment for a Request** page will show the weeks for which an overpayment was calculated. The system shows the Issued Net Amount (original amount paid), the New Net Amount (the correct amount that should have been paid), and the Adjustment Amount (the overpayment for each week of attendance).

STEP 9

1. Establish the Total Adjustment Amount as an overpayment claim on the Benefit Recovery Claim (BVCL) screen and
2. Click on the Excel icon to download the adjustments into a spreadsheet. Send the spreadsheet to the client to show how the overpayment was calculated.


Client Payment Adjustments for a Request

Client Payment Adjustments for a Request

Case Details

Case # 8700535788 **Agency** Milwaukee County
Primary Person Anne Atom

Request Details

Request ID C0007 **Correction Type** Eligibility (Individual/Group)
Adjustment Begin Date 06/17/2012 **Adjustment End Date** 09/01/2012
Request Status Calculated

Excel

Click the Excel icon above to download the data in Excel format.

Client Payment Adjustments for a Request (Total Adjustment Amount: ($641.84))

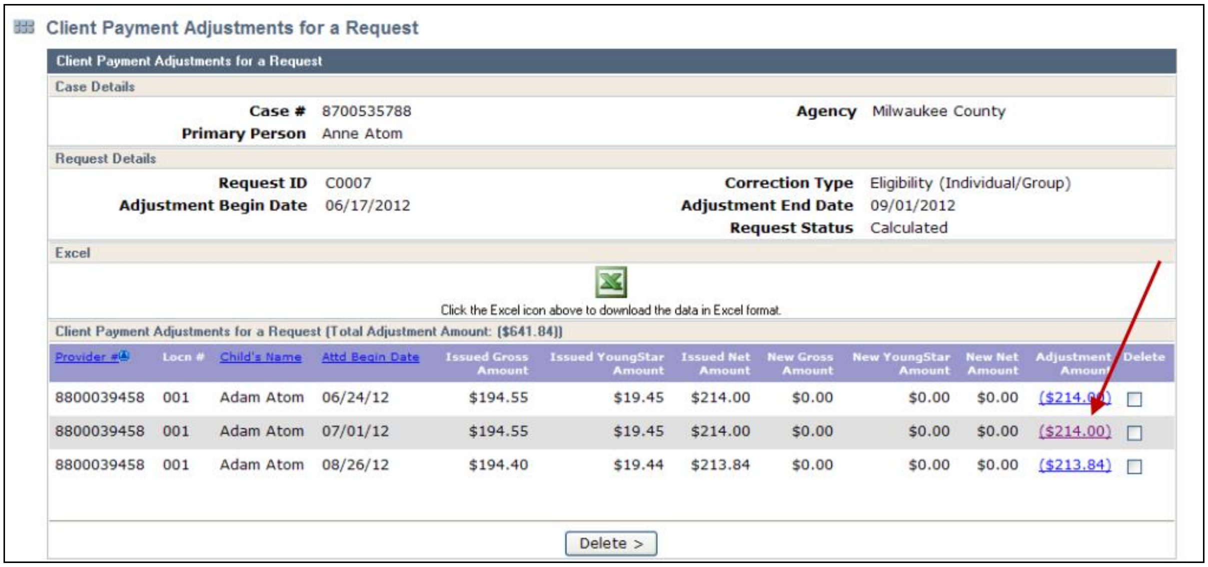
Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Delete
8800039458	001	Adam Atom	06/24/12	$194.55	$19.45	$214.00	$0.00	$0.00	$0.00	($214.00)	
8800039458	001	Adam Atom	07/01/12	$194.55	$19.45	$214.00	$0.00	$0.00	$0.00	($214.00)	
8800039458	001	Adam Atom	08/26/12	$194.40	$19.44	$213.84	$0.00	$0.00	$0.00	($213.84)	

Delete >

Adjustment Amounts in parentheses indicate a negative amount and those not in parentheses are a positive amount.

In this example, the three weeks of adjustments resulted in the following negative amounts: $214.00, $214.00, and $213.84 for a total overpayment of $641.84. Enter this amount in the BV system as an overpayment claim against the client.

Adjustment amount details can be viewed by selecting an Adjustment Amount.



Client Payment Adjustments for a Request

Client Payment Adjustments for a Request

Case Details

Case #	8700535788	**Agency**	Milwaukee County
Primary Person	Anne Atom		

Request Details

Request ID	C0007	**Correction Type**	Eligibility (Individual/Group)
Adjustment Begin Date	06/17/2012	**Adjustment End Date**	09/01/2012
		Request Status	Calculated

Excel

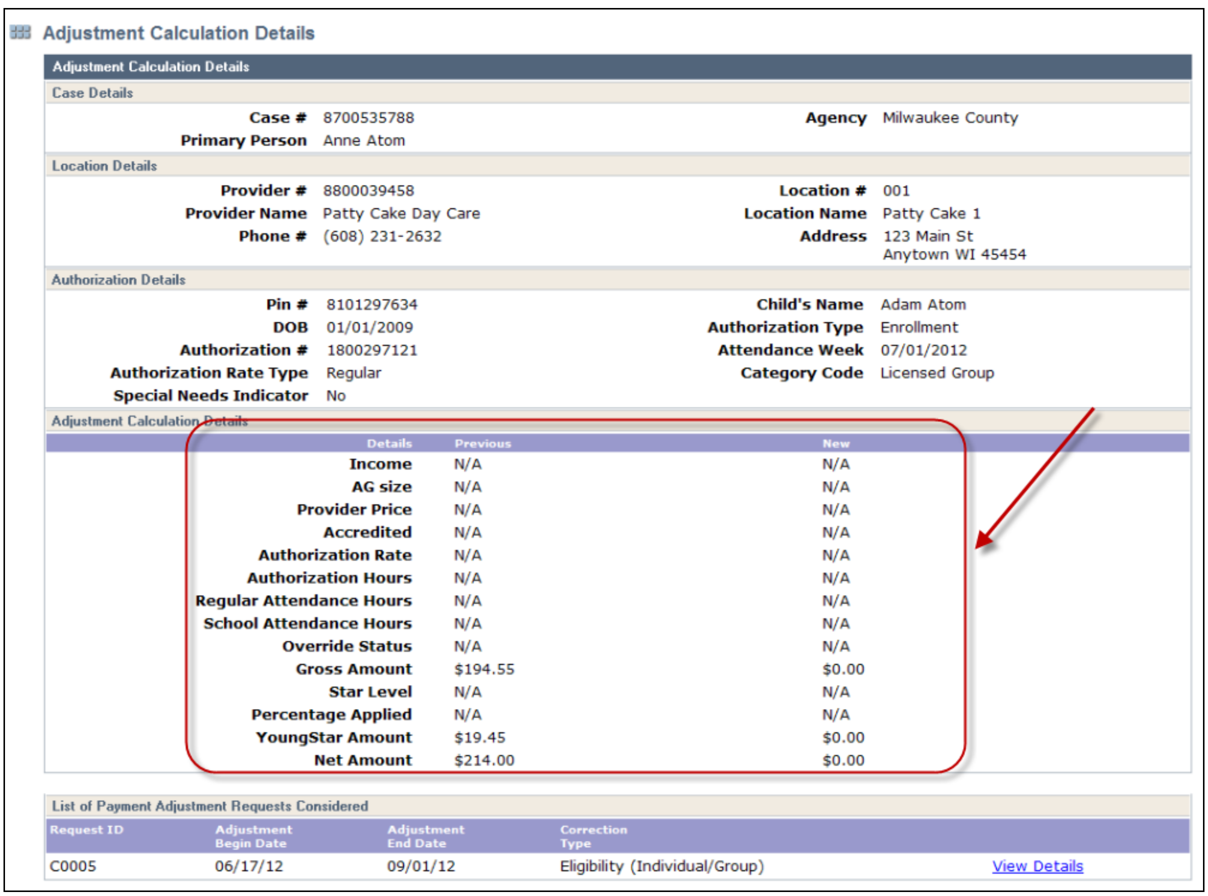
Click the Excel icon above to download the data in Excel format.

Client Payment Adjustments for a Request (Total Adjustment Amount: ($641.84))

Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Delete
8800039458	001	Adam Atom	06/24/12	$194.55	$19.45	$214.00	$0.00	$0.00	$0.00	($214.00)	☐
8800039458	001	Adam Atom	07/01/12	$194.55	$19.45	$214.00	$0.00	$0.00	$0.00	($214.00)	☐
8800039458	001	Adam Atom	08/26/12	$194.40	$19.44	$213.84	$0.00	$0.00	$0.00	($213.84)	☐

Delete >

Below is an example of these details for the Adjustment Amount of $214.00 for the week of 7/1/2012. In this example, it shows that the child was not eligible for child care; therefore, all the information except for the previous Net Amount has determined to be Not Applicable (N/A).



Adjustment Calculation Details

Adjustment Calculation Details

Case Details

Case #	8700535788	**Agency**	Milwaukee County
Primary Person	Anne Atom		

Location Details

Provider #	8800039458	**Location #**	001
Provider Name	Patty Cake Day Care	**Location Name**	Patty Cake 1
Phone #	(608) 231-2632	**Address**	123 Main St Anytown WI 45454

Authorization Details

Pin #	8101297634	**Child's Name**	Adam Atom
DOB	01/01/2009	**Authorization Type**	Enrollment
Authorization #	1800297121	**Attendance Week**	07/01/2012
Authorization Rate Type	Regular	**Category Code**	Licensed Group
Special Needs Indicator	No		

Adjustment Calculation Details

Details	Previous	New
Income	N/A	N/A
AG size	N/A	N/A
Provider Price	N/A	N/A
Accredited	N/A	N/A
Authorization Rate	N/A	N/A
Authorization Hours	N/A	N/A
Regular Attendance Hours	N/A	N/A
School Attendance Hours	N/A	N/A
Override Status	N/A	N/A
Gross Amount	$194.55	$0.00
Star Level	N/A	N/A
Percentage Applied	N/A	N/A
YoungStar Amount	$19.45	$0.00
Net Amount	$214.00	$0.00

List of Payment Adjustment Requests Considered

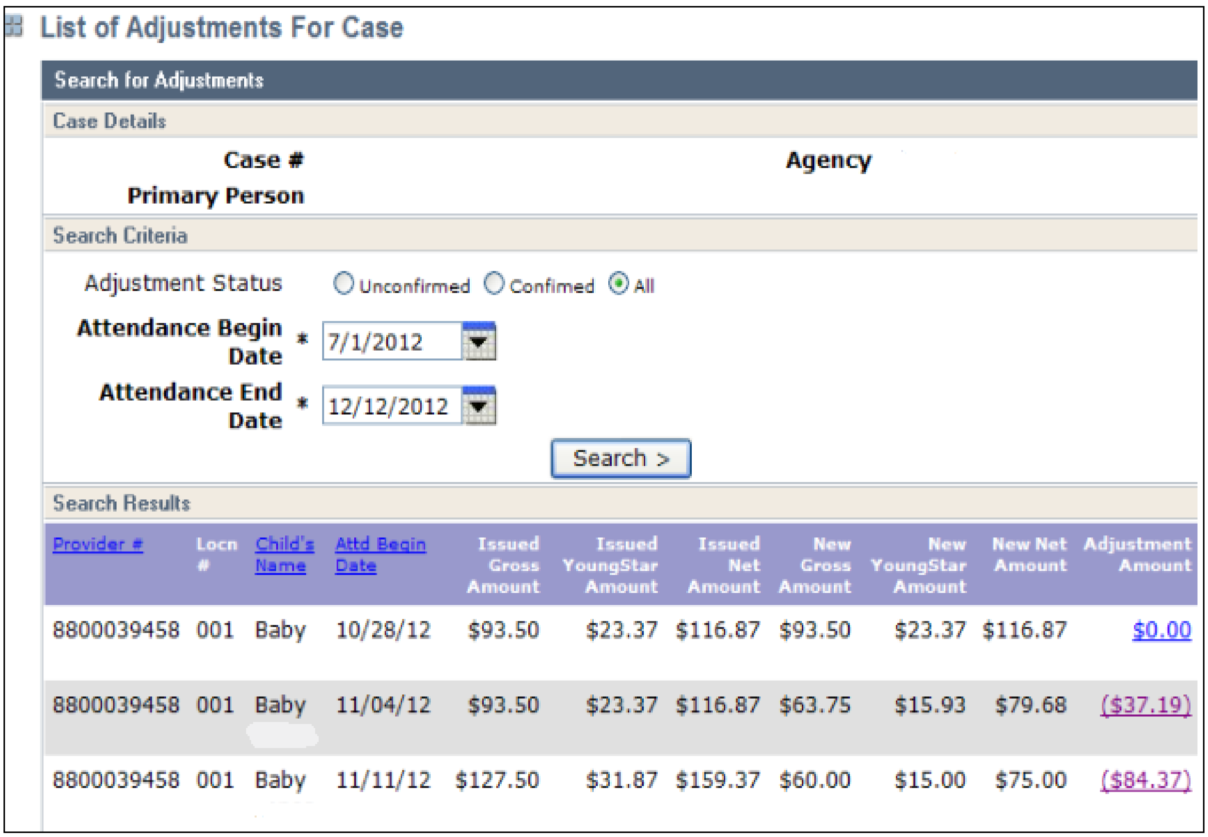
Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
C0005	06/17/12	09/01/12	Eligibility (Individual/Group)	View Details

YoungStar

The PIES calculation columns in the client and provider payment adjustment screens capture YoungStar amounts in the PIES calculation. **The List of Adjustments for Case** page and the **Provider Payment Adjustments** page have been updated on both the parent and provider adjustment screens:

The following column headers have been **re-named**:

- **Issued YoungStar Amount:** the total amount of YoungStar adjustment for this payment.
- **Issued Net Amount:** the full reimbursement amount that was paid, including the YoungStar amount.
- **New Gross Amount**: the corrected Issued Gross Amount before the YoungStar adjustment is applied.
- **New YoungStar Amount:** the corrected YoungStar adjustment.



List of Adjustments For Case

Search for Adjustments

Case Details

Case # Agency

Primary Person

Search Criteria

Adjustment Status: Unconfirmed / Confirmed / All

Attendance Begin Date * 7/1/2012

Attendance End Date * 12/12/2012

Search >

Search Results

Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount
8800039458	001	Baby	10/28/12	$93.50	$23.37	$116.87	$93.50	$23.37	$116.87	$0.00
8800039458	001	Baby	11/04/12	$93.50	$23.37	$116.87	$63.75	$15.93	$79.68	($37.19)
8800039458	001	Baby	11/11/12	$127.50	$31.87	$159.37	$60.00	$15.00	$75.00	($84.37)

Client Overpayment When Income Was Reported Incorrectly

Refer to **Client Related Adjustments** section to enter into PIES to search for a case and enter the Client Payment Adjustment.

This functionality does not work for client overpayments where the “Other” rate type is used. In this situation, you will have to manually calculate the overpayment.

In the example below, the primary person reports a monthly income of $344.00. During a review, the worker discovers that she failed to report she was also receiving tips and her estranged husband re-entered the household. Their combine income was actually $3,361 per month.

STEP 1 – Enter the following information on the **New Client Payment Adjustment Request** screen.

1. **Adjustment Time Frame**
    - Adjustment Begin Date – the Sunday of the first attendance week when the child was not eligible for child care.
    - Adjustment End Date – the Saturday of the last attendance week when the child was not eligible for child care.

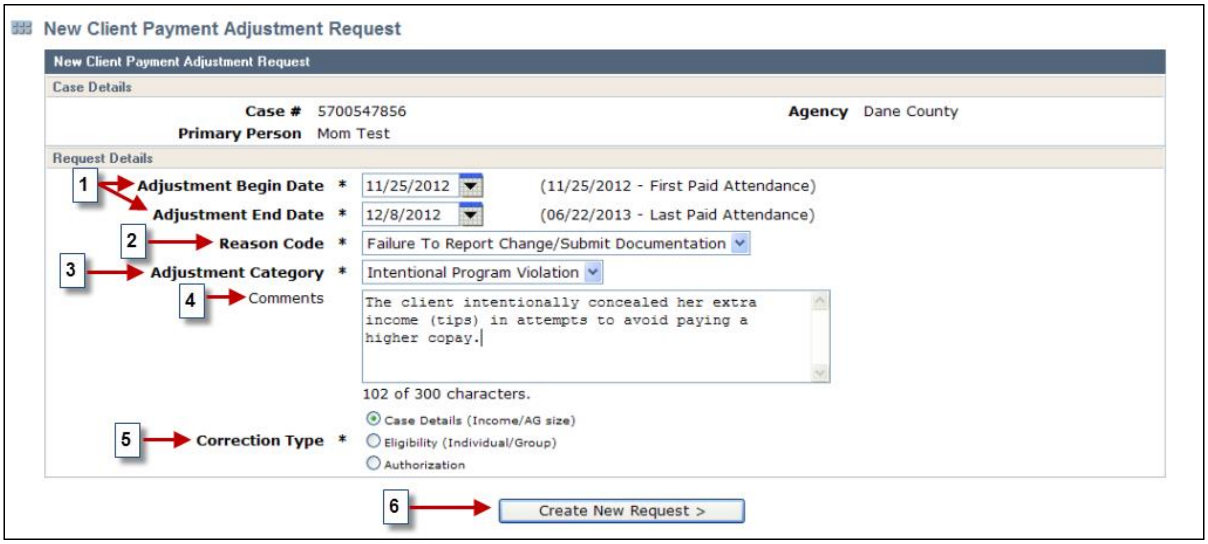
2. **Reason Code –** select the reason for which the child was marked not eligible during the period.

3. **Adjustment Category** – indicates who is responsible for the overpayment.
    - Agency Error
    - Client Error
    - Intentional Program Violation

4. **Comments –** the worker enters why the payment adjustment is being made.

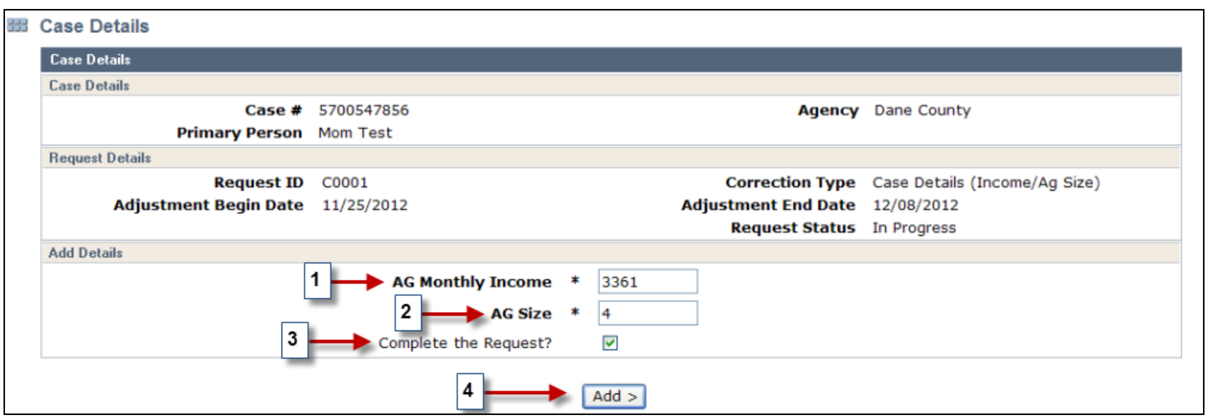
5. **Correction Type** – indicates the type of error that occurred. In this example it is **Case Details (Income/AG size)**.

6. **Select** Create New Request.



STEP 2 – Enter the necessary information on the **Case Details** screen.

1. **AG Monthly Income** – enter in the correct monthly income.
2. **AG Size –** enter in the correct AG size.
3. **Complete the Request –** check the box to complete the request. The overpayment will not be calculated if the request is not checked as completed.
4. **Select** the Add button to submit the corrected information.



This brings the worker to the **List of Client Payment Adjustment Requests** page which shows the adjustments just entered.

If completed correctly, the status will show **Completed**. If the status shows **In Progress** refer to **Mark as Completed and Prep for Overnight Processing** steps on page 9.

STEP 3 – The completed request will process overnight.

Adjustment Calculations

STEP 4 – View the Calculations.

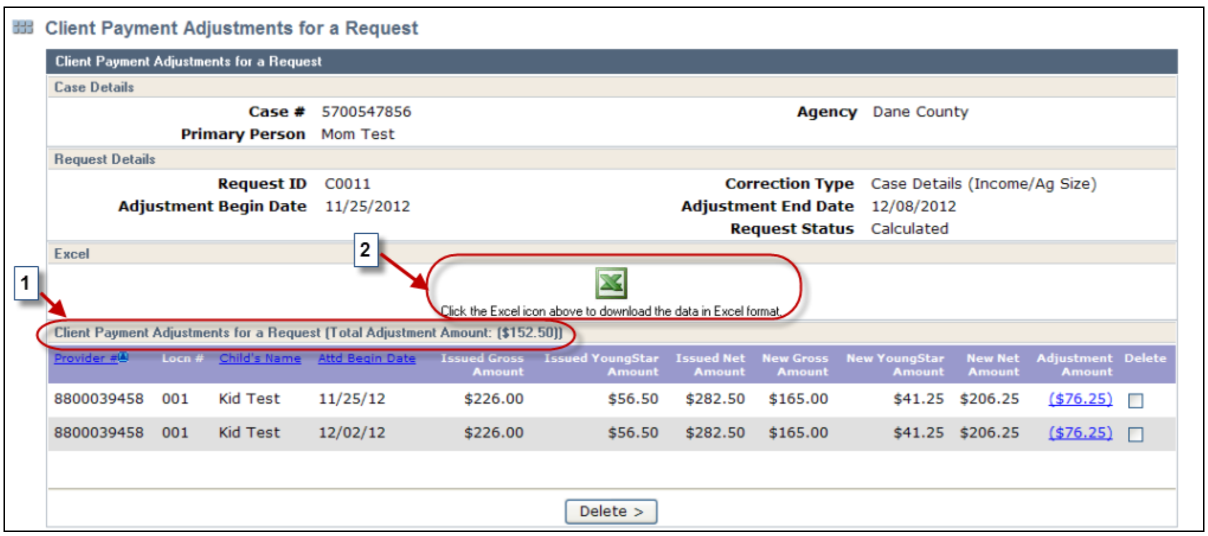
1. Enter PIES the next day and select **Client Payment Adjustment Request**.
2. Search by Case, SSN, PIN number associated with the client.
3. View the Calculated Adjustments by clicking on the Adjustments links.

*Refer to **The Next Day: What to Process Next** on page 10.

STEP 5

1. Establish the Total Adjustment Amount as an overpayment claim on the Benefit Recovery Claim (BVCL) screen and
2. Click on the Excel icon to download the adjustments into a spreadsheet. Send the spreadsheet to the client to show how the overpayment was calculated.

In this example, both weeks resulted in negative amounts of $76.25 for a total overpayment of $152.50.


Client Payment Adjustments for a Request

Client Payment Adjustments for a Request

Case Details

Case # 5700547856 Agency Dane County
Primary Person Mom Test

Request Details

Request ID C0011 Correction Type Case Details (Income/Ag Size)
Adjustment Begin Date 11/25/2012 Adjustment End Date 12/08/2012
Request Status Calculated

Excel

2

Click the Excel icon above to download the data in Excel format.

1

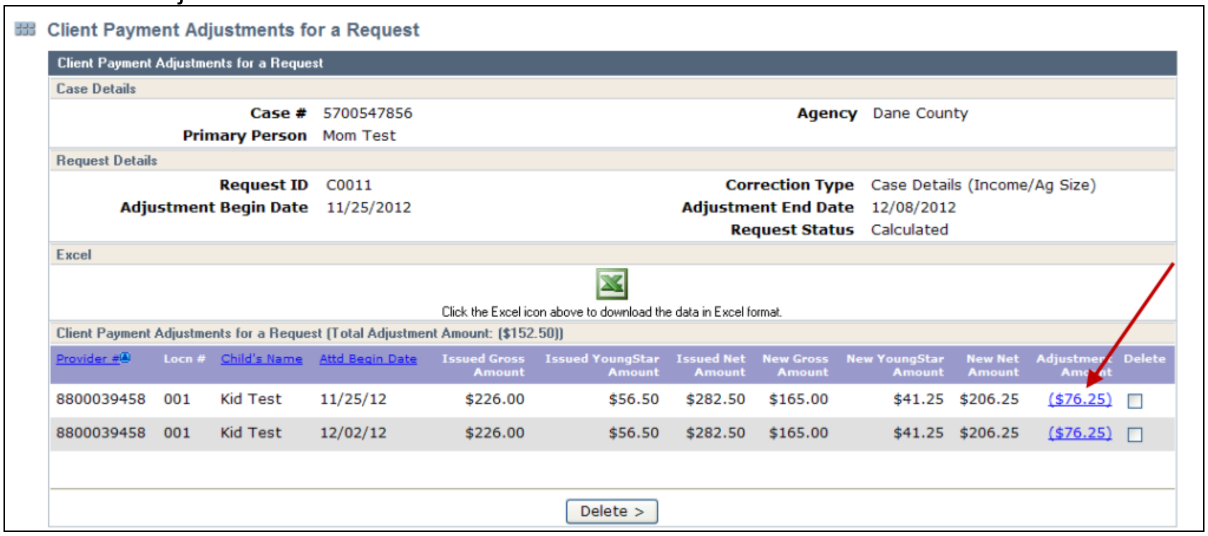
Client Payment Adjustments for a Request (Total Adjustment Amount: ($152.50))

Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Delete
8800039458	001	Kid Test	11/25/12	$226.00	$56.50	$282.50	$165.00	$41.25	$206.25	($76.25)	
8800039458	001	Kid Test	12/02/12	$226.00	$56.50	$282.50	$165.00	$41.25	$206.25	($76.25)	

Delete >

Adjustment Amounts in parentheses indicate a negative amount and those not in parentheses indicate a positive amount.

Select the Adjustment Amount for further details on the calculation.



Client Payment Adjustments for a Request

Client Payment Adjustments for a Request

Case Details

Case # 5700547856 **Agency** Dane County
Primary Person Mom Test

Request Details

Request ID C0011 **Correction Type** Case Details (Income/Ag Size)
Adjustment Begin Date 11/25/2012 **Adjustment End Date** 12/08/2012
Request Status Calculated

Excel

Click the Excel icon above to download the data in Excel format.

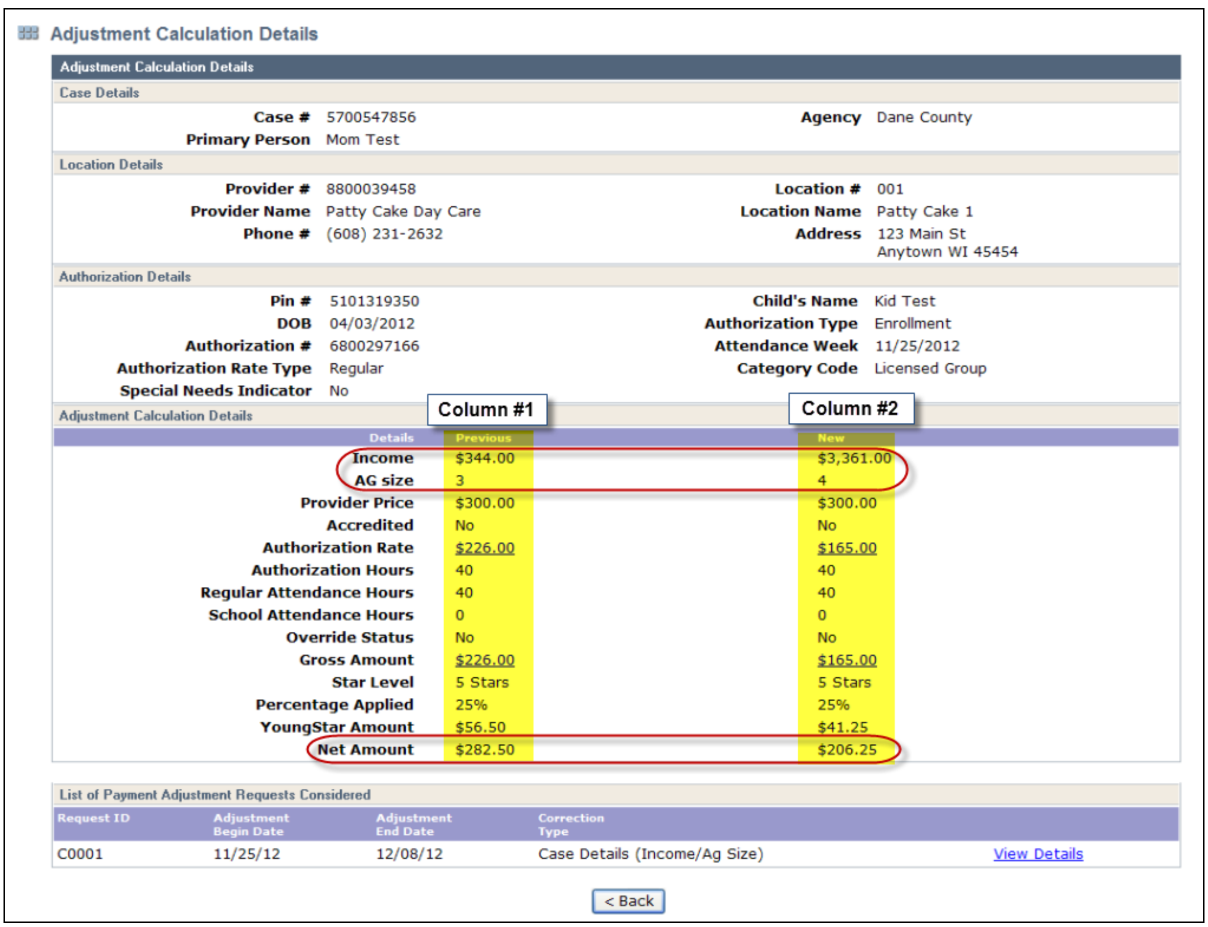
Client Payment Adjustments for a Request (Total Adjustment Amount: ($152.50))

Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Delete
8800039458	001	Kid Test	11/25/12	$226.00	$56.50	$282.50	$165.00	$41.25	$206.25	($76.25)	☐
8800039458	001	Kid Test	12/02/12	$226.00	$56.50	$282.50	$165.00	$41.25	$206.25	($76.25)	☐

Delete >

In this example, Column #1 shows the Previous Issuance Amount Details where income was $344.00 and the Assistance Group (AG) size was 3.

Column #2 shows the New Issuance Amount Details where the income was changed to $3,361.00 and Assistance Group (AG) was change to 4.



Adjustment Calculation Details

Adjustment Calculation Details

Case Details

Case # 5700547856 **Agency** Dane County
Primary Person Mom Test

Location Details

Provider # 8800039458 **Location #** 001
Provider Name Patty Cake Day Care **Location Name** Patty Cake 1
Phone # (608) 231-2632 **Address** 123 Main St
Anytown WI 45454

Authorization Details

Pin # 5101319350 **Child's Name** Kid Test
DOB 04/03/2012 **Authorization Type** Enrollment
Authorization # 6800297166 **Attendance Week** 11/25/2012
Authorization Rate Type Regular **Category Code** Licensed Group
Special Needs Indicator No

Adjustment Calculation Details

Details	Previous (Column #1)	New (Column #2)
Income	$344.00	$3,361.00
AG size	3	4
Provider Price	$300.00	$300.00
Accredited	No	No
Authorization Rate	$226.00	$165.00
Authorization Hours	40	40
Regular Attendance Hours	40	40
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$226.00	$165.00
Star Level	5 Stars	5 Stars
Percentage Applied	25%	25%
YoungStar Amount	$56.50	$41.25
Net Amount	$282.50	$206.25

List of Payment Adjustment Requests Considered

Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
C0001	11/25/12	12/08/12	Case Details (Income/Ag Size)	View Details

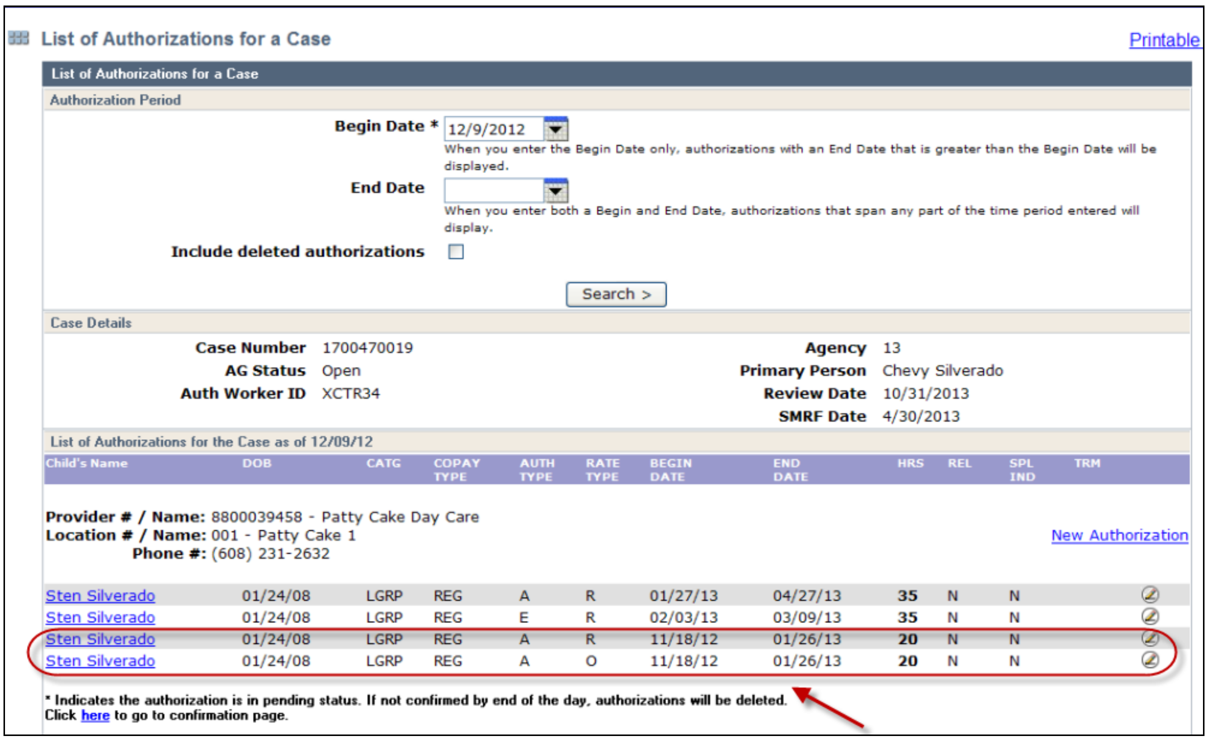
< Back

This screen also shows how the Adjustment Amount of $76.25 was calculated, which is the Previous Net Amount of $282.50 subtracted by the New Net Amount of $206.25.

Client Overpayment for Over-Authorized Hours

Refer to **Client Related Adjustments** section to enter into PIES to search for a case and enter the Client payment Adjustment.

In the example below at the time of authorization, the parent reported having a varied schedule of approximately 10-15 hours per week including travel time. The agency created two attendance based authorizations for 20 hours. In addition, the client was misinformed by the agency to utilize the authorization or the hours may be reduced.



List of Authorizations for a Case

Printable

List of Authorizations for a Case

Authorization Period

Begin Date * 12/9/2012

When you enter the Begin Date only, authorizations with an End Date that is greater than the Begin Date will be displayed.

End Date

When you enter both a Begin and End Date, authorizations that span any part of the time period entered will display.

Include deleted authorizations

Search >

Case Details

Case Number	1700470019	**Agency**	13
AG Status	Open	**Primary Person**	Chevy Silverado
Auth Worker ID	XCTR34	**Review Date**	10/31/2013
		SMRF Date	4/30/2013

List of Authorizations for the Case as of 12/09/12

Provider # / Name: 8800039458 - Patty Cake Day Care
Location # / Name: 001 - Patty Cake 1
Phone #: (608) 231-2632

New Authorization

Child's Name	DOB	CATG	COPAY TYPE	AUTH TYPE	RATE TYPE	BEGIN DATE	END DATE	HRS	REL	SPL IND	TRM
Sten Silverado	01/24/08	LGRP	REG	A	R	01/27/13	04/27/13	35	N	N	
Sten Silverado	01/24/08	LGRP	REG	E	R	02/03/13	03/09/13	35	N	N	
Sten Silverado	01/24/08	LGRP	REG	A	R	11/18/12	01/26/13	20	N	N	
Sten Silverado	01/24/08	LGRP	REG	A	O	11/18/12	01/26/13	20	N	N	

* Indicates the authorization is in pending status. If not confirmed by end of the day, authorizations will be deleted.
Click here to go to confirmation page.

STEP 1 – Enter the following information on the **New Client Payment Adjustment Request** screen.

1. **Adjustment Time Frame**
   - Adjustment Begin Date – the Sunday of the first attendance week when the decrease was not reported.
   - Adjustment End Date – the Saturday of the last attendance week when the decrease was not reported.

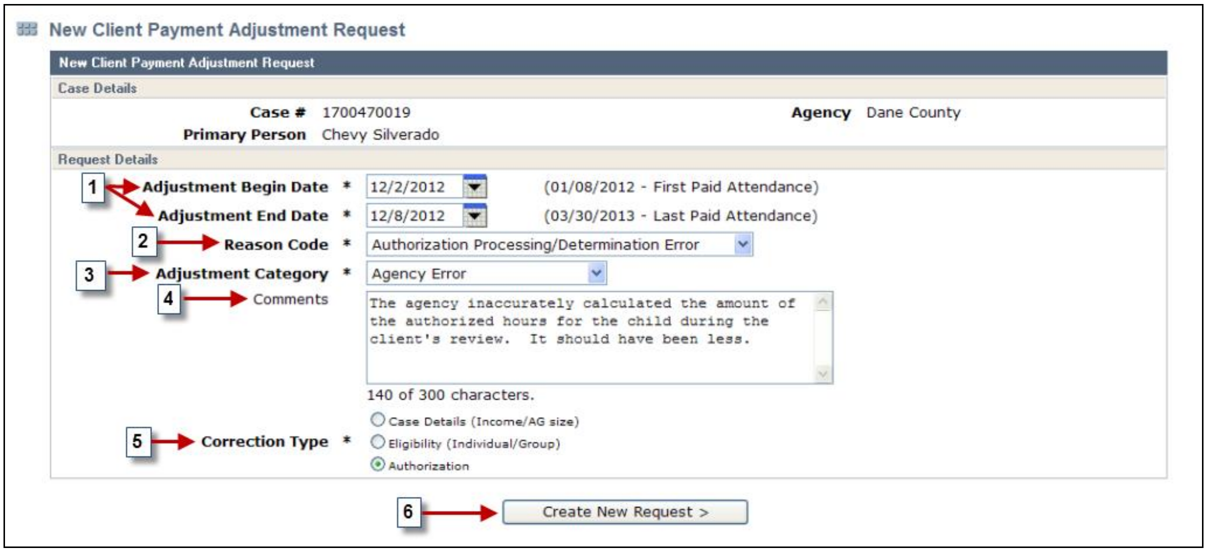
2. **Reason Code** – select the reason for which the child was marked not eligible during the period.

3. **Adjustment Category** – indicates who is responsible for the overpayment.
    - Agency Error
    - Client Error
    - Intentional Program Violation

4. **Comments** – the worker enters why the payment adjustment is being made.

5. **Correction Type –** indicates the type of error that occurred. In this example, it is **Authorization**.

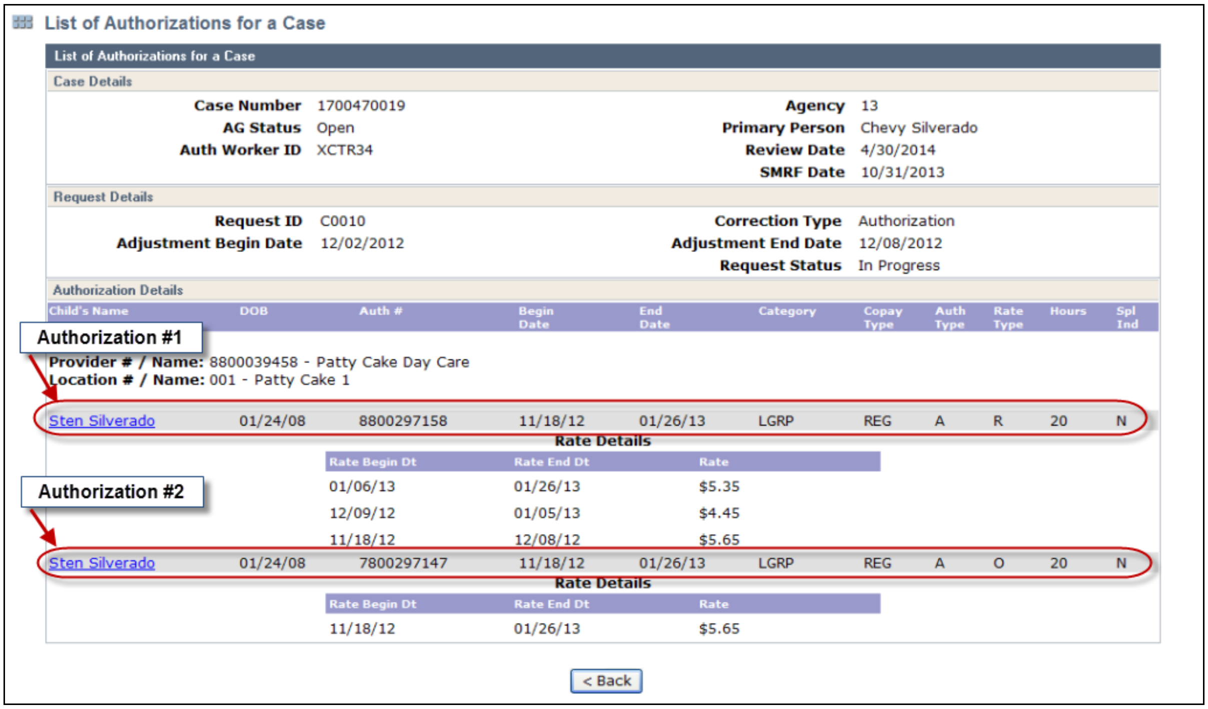
6. **Select** Create New Request.



STEP 2 – Select child's name whose authorization needs to be adjusted. Each child must be selected individually to change the authorization.

In this example, there is only one child with two authorizations. Click on the child's name for each authorization to correct.

Note: The system will not allow you to use 0 hours for one authorization and 15 hours for the other; therefore, split the correct authorization hours between the two adjustments.



STEP 3 – On the **Correct Authorization/Attendance Details for Case Payment Adjustment** screen.

1. If the new authorized hours are the same for all weeks within the range, enter the hours and check the box. This will adjust the Authorization Hours for all the weeks associated with the overpayment timeframe. **OR**

2. Enter the correct number of weekly authorized hours for the child individually by week.

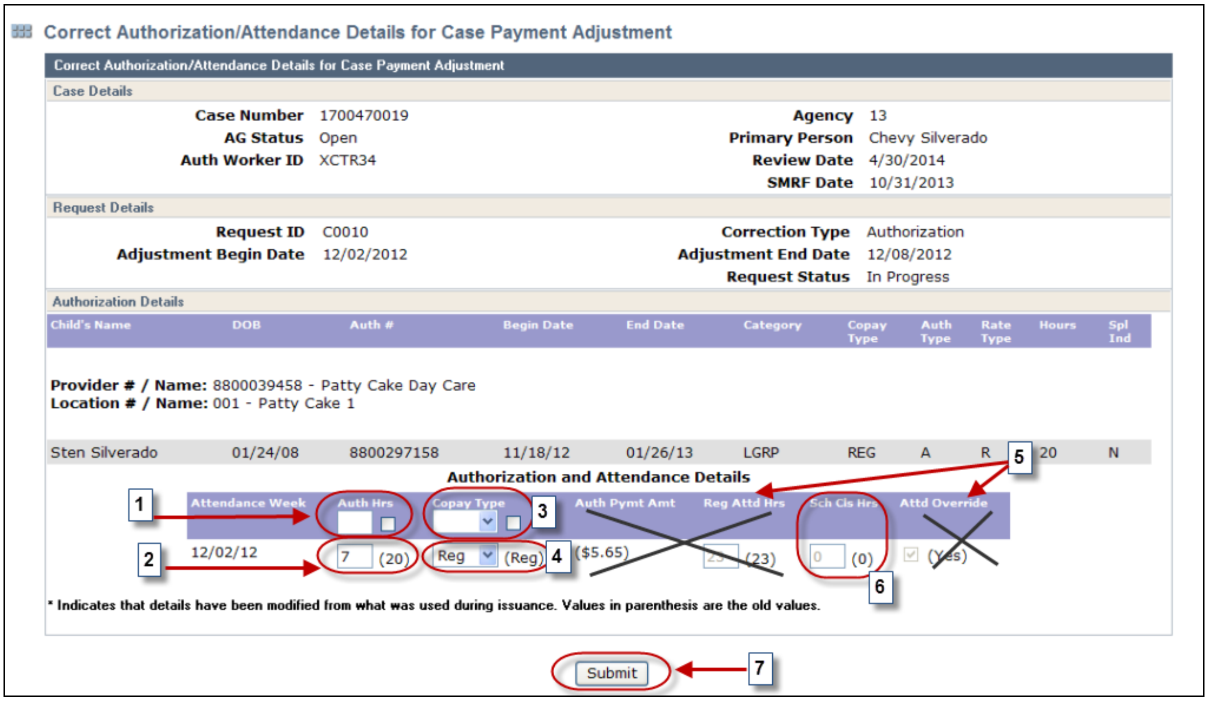
3. If the new copay type is the same for all the weeks within the range, enter the copay type and check the box. **OR**

4. Enter the corrected copay type for the child individually by week.

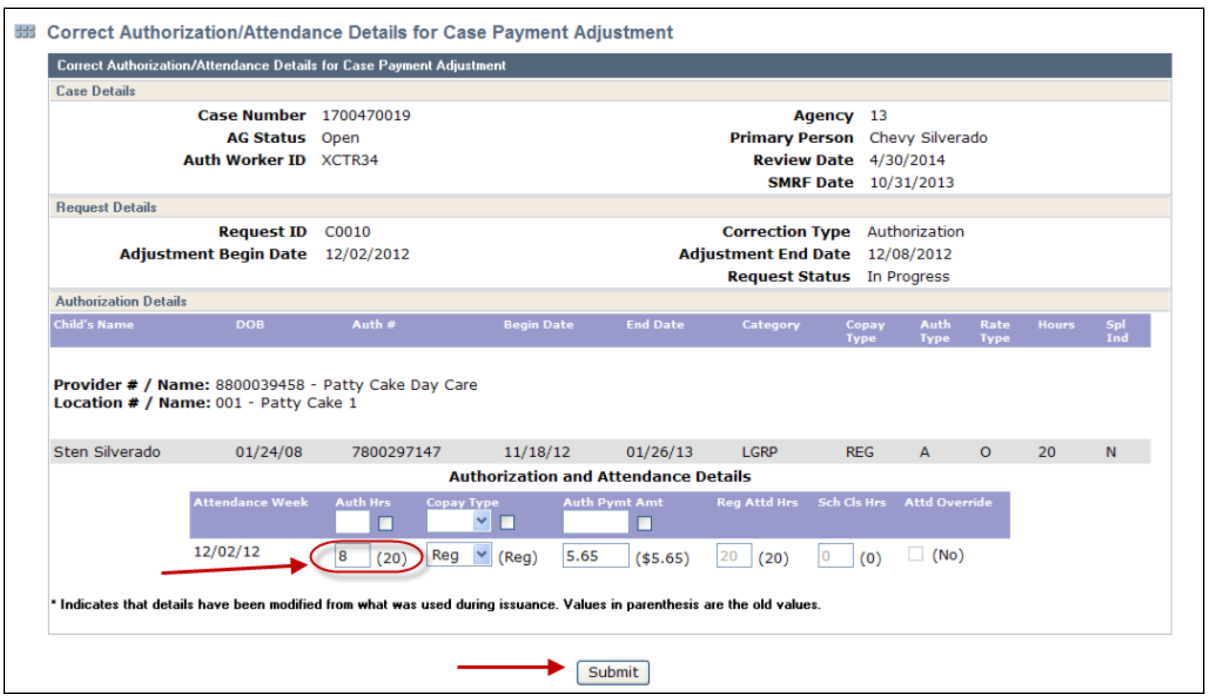
5. **PIES will not allow you to alter** Authorized Payment Amount, Regular Attendance Hours, or Attendance Override. These are all displayed as read-only for a Client Overpayment.

6. School Closed Hours can only be altered in scenarios that have a school aged child that has the ability to have school closed hours. In this example, it would not be used.

7. Select Submit.

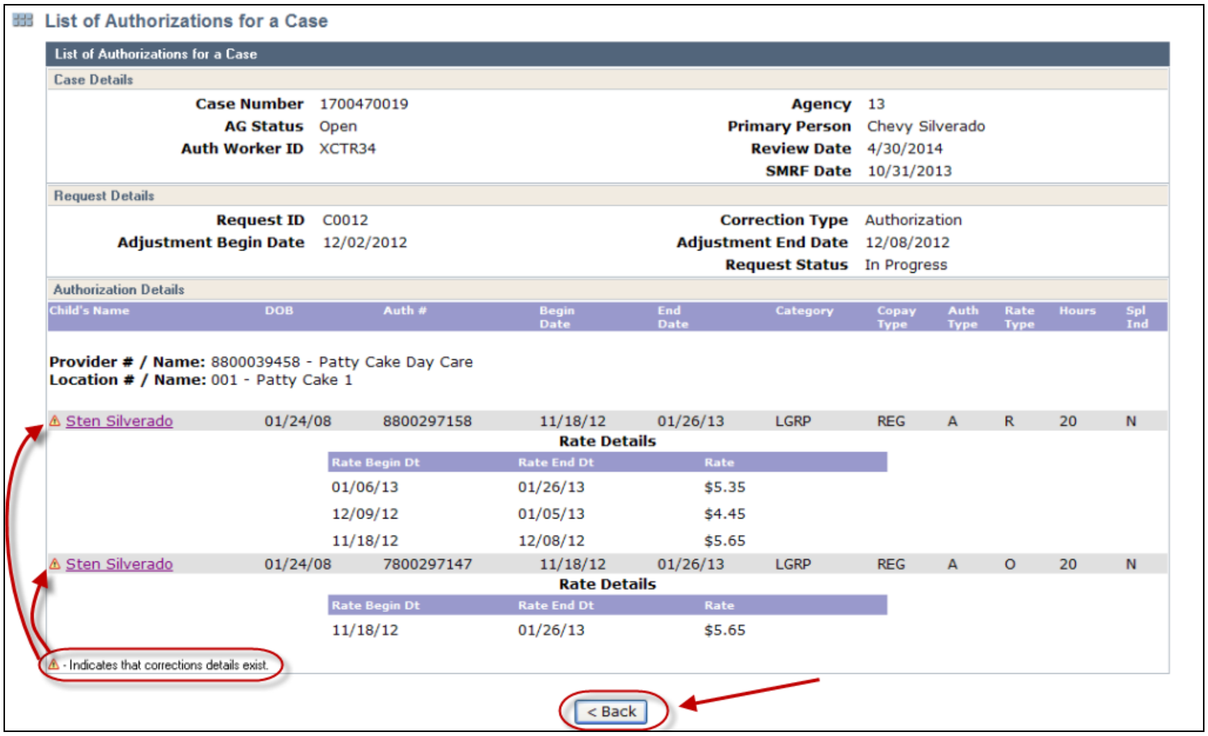


STEP 4 – Correct the 2nd authorization, so together the authorized hours reflect the actual hours that should have been utilized and select Submit.



List of Authorizations for a Case

The informational symbol to the left of the child's name indicates the details of the authorization have been changed for this child. If no other changes need to be made for this child, click on the Back button.



List of Authorizations for a Case

List of Authorizations for a Case

Case Details

Case Number	1700470019	**Agency**	13
AG Status	Open	**Primary Person**	Chevy Silverado
Auth Worker ID	XCTR34	**Review Date**	4/30/2014
		SMRF Date	10/31/2013

Request Details

Request ID	C0012	**Correction Type**	Authorization
Adjustment Begin Date	12/02/2012	**Adjustment End Date**	12/08/2012
		Request Status	In Progress

Authorization Details

Provider # / Name: 8800039458 - Patty Cake Day Care
Location # / Name: 001 - Patty Cake 1

Child's Name	DOB	Auth #	Begin Date	End Date	Category	Copay Type	Auth Type	Rate Type	Hours	Spl Ind
Sten Silverado	01/24/08	8800297158	11/18/12	01/26/13	LGRP	REG	A	R	20	N

Rate Details

Rate Begin Dt	Rate End Dt	Rate
01/06/13	01/26/13	$5.35
12/09/12	01/05/13	$4.45
11/18/12	12/08/12	$5.65

Child's Name	DOB	Auth #	Begin Date	End Date	Category	Copay Type	Auth Type	Rate Type	Hours	Spl Ind
Sten Silverado	01/24/08	7800297147	11/18/12	01/26/13	LGRP	REG	A	O	20	N

Rate Details

Rate Begin Dt	Rate End Dt	Rate
11/18/12	01/26/13	$5.65

- Indicates that corrections details exist.

< Back

STEP 5 – Complete the Adjustment Request by selecting the Edit icon.

If completed correctly, the status will show Completed. If the status shows In Progress refer to **Mark as Completed for Overnight Processing** steps on page 9.

STEP 6 – The completed request will process overnight.

Adjustment Calculations

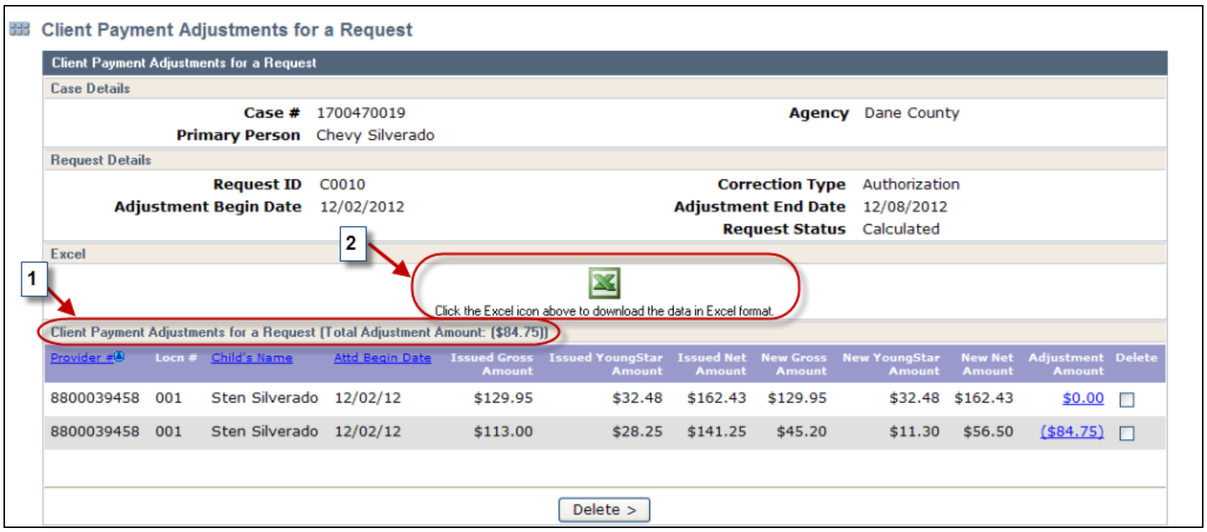
STEP 7 – View the Calculations.

1. Enter PIES the next day and select Client Payment Adjustment Request.
2. Search by Case, SSN, or PIN number associated with the client.
3. View the Calculated Adjustments by clicking on the Adjustments link.

*Refer to **The Next Day: What to Process** Next on page 10.

STEP 8

1. Establish the Total Adjustment Amount as an overpayment claim on the Benefit Recovery Claim (BVCL) screen and
2. Click on the Excel icon to download the adjustments into a spreadsheet. Send the spreadsheet to the client to show how the overpayment was calculated.


Client Payment Adjustments for a Request

Client Payment Adjustments for a Request

Case Details

Case # 1700470019 | Agency Dane County

Primary Person Chevy Silverado

Request Details

Request ID C0010 | Correction Type Authorization

Adjustment Begin Date 12/02/2012 | Adjustment End Date 12/08/2012

Request Status Calculated

Excel

2

1

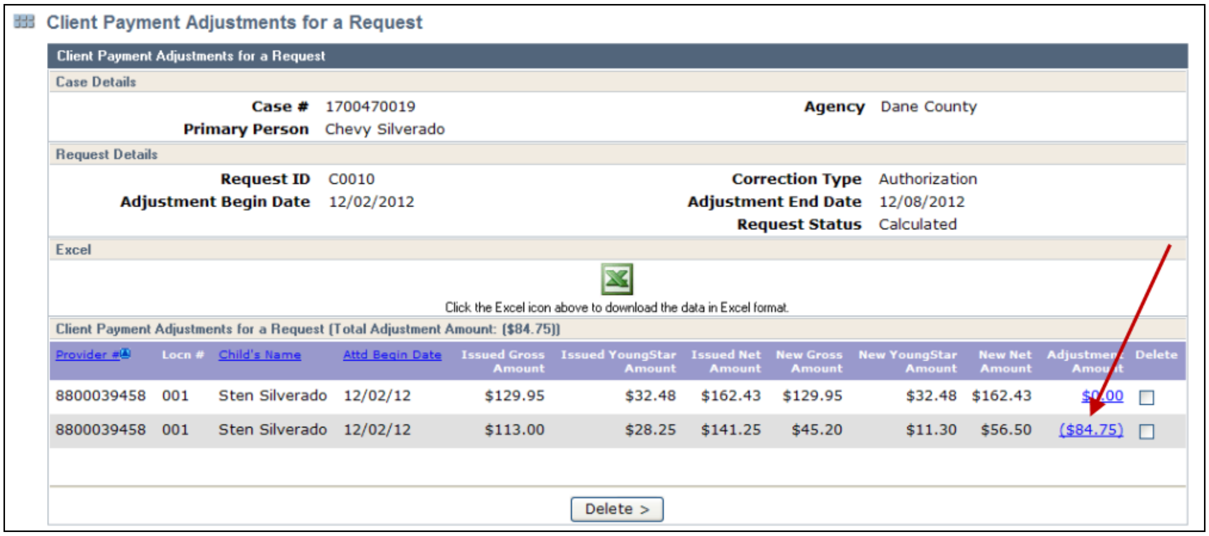
Click the Excel icon above to download the data in Excel format.

Client Payment Adjustments for a Request [Total Adjustment Amount: ($84.75)]

Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Delete
8800039458	001	Sten Silverado	12/02/12	$129.95	$32.48	$162.43	$129.95	$32.48	$162.43	$0.00	☐
8800039458	001	Sten Silverado	12/02/12	$113.00	$28.25	$141.25	$45.20	$11.30	$56.50	($84.75)	☐

Delete >

Further details on the Adjustment Amount can be viewed by selecting Adjustment Amount.



Client Payment Adjustments for a Request

Client Payment Adjustments for a Request

Case Details

Case # 1700470019 **Agency** Dane County
Primary Person Chevy Silverado

Request Details

Request ID C0010 **Correction Type** Authorization
Adjustment Begin Date 12/02/2012 **Adjustment End Date** 12/08/2012
Request Status Calculated

Excel

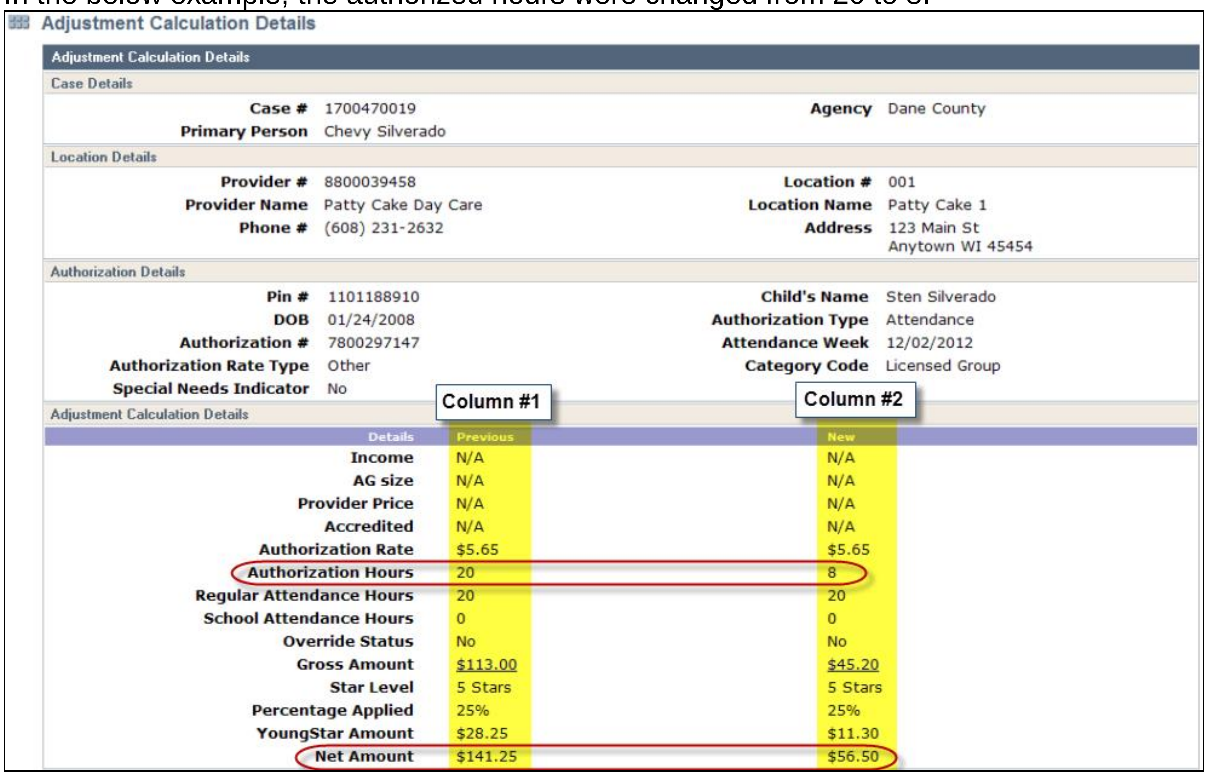
Click the Excel icon above to download the data in Excel format.

Client Payment Adjustments for a Request [Total Adjustment Amount: ($84.75)]

Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Delete
8800039458	001	Sten Silverado	12/02/12	$129.95	$32.48	$162.43	$129.95	$32.48	$162.43	$0.00	☐
8800039458	001	Sten Silverado	12/02/12	$113.00	$28.25	$141.25	$45.20	$11.30	$56.50	($84.75)	☐

Delete >

In the below example, the authorized hours were changed from 20 to 8.



Adjustment Calculation Details

Adjustment Calculation Details

Case Details

Case # 1700470019 **Agency** Dane County
Primary Person Chevy Silverado

Location Details

Provider # 8800039458 **Location #** 001
Provider Name Patty Cake Day Care **Location Name** Patty Cake 1
Phone # (608) 231-2632 **Address** 123 Main St
Anytown WI 45454

Authorization Details

Pin # 1101188910 **Child's Name** Sten Silverado
DOB 01/24/2008 **Authorization Type** Attendance
Authorization # 7800297147 **Attendance Week** 12/02/2012
Authorization Rate Type Other **Category Code** Licensed Group
Special Needs Indicator No

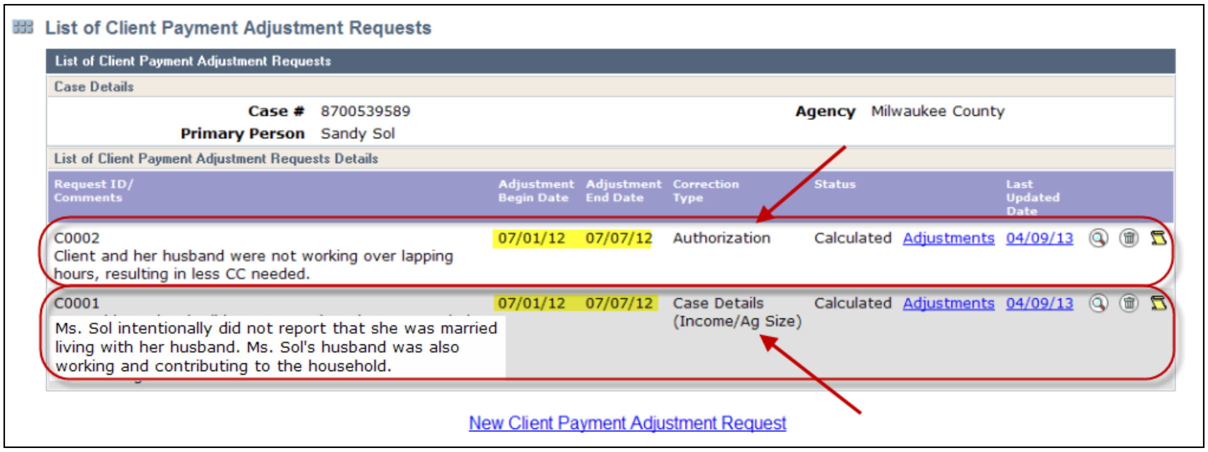
Adjustment Calculation Details

Details	Previous	New
Income	N/A	N/A
AG size	N/A	N/A
Provider Price	N/A	N/A
Accredited	N/A	N/A
Authorization Rate	$5.65	$5.65
Authorization Hours	20	8
Regular Attendance Hours	20	20
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$113.00	$45.20
Star Level	5 Stars	5 Stars
Percentage Applied	25%	25%
YoungStar Amount	$28.25	$11.30
Net Amount	$141.25	$56.50

This screen also shows how the Adjustment Amounts of $84.75 was calculated, which is the Previous Net Amount of $141.25 subtracted by the New Net Amount of $56.50.

Client Overpayment for Over-Authorized Hours, Income, or AG Size

STEP 1 – Enter the two separate overpayment scenarios as outline in the **Calculating a Client Overpayment When Income or AG Was Reported Incorrectly** and **Calculating a Client Overpayment When Authorized Hours Were More Than Required Care Hours** sections for the same client for the same time frame.



The dual request will use all the corrected information to create the adjustments.

STEP 2 – Complete the Adjustment Request by selecting the Edit icon.

If completed correctly, the status will show Completed. If the status shows In Progress refer to **Mark as Completed for Overnight Processing** step on page 9.

STEP 3 – The complete request will process overnight.

Adjustment Calculations

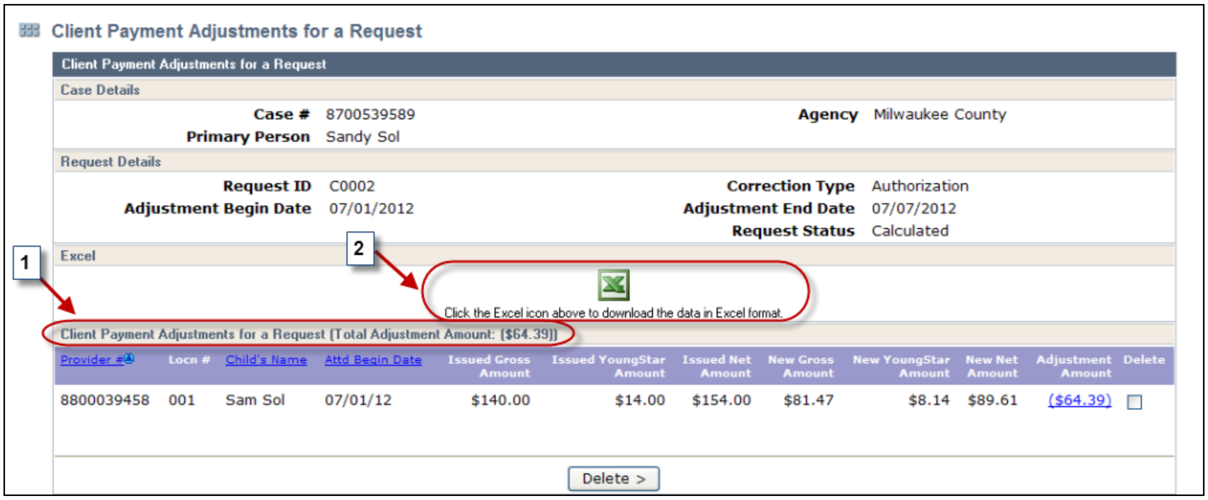
STEP 4 – View the Calculations.

1. Enter PIES the next day and select Client Payment Adjustment Request.
2. Search by Case, SSN, or PIN number associated with the client.
3. View the Calculated Adjustments by clicking on the Adjustments link.

*Refer to **"The Next Day: What to Process Next"** on page 10 for further details.

STEP 5

1. Establish the Total Adjustment Amount as an overpayment claim on the Benefit Recovery Claim (BVCL) screen and
2. Click on the Excel icon to download the adjustments into a spreadsheet. Send the spreadsheet to the client to show how the overpayment was calculated.



Client Payment Adjustments for a Request

Client Payment Adjustments for a Request			
Case Details			
Case #	8700539589	**Agency**	Milwaukee County
Primary Person	Sandy Sol		
Request Details			
Request ID	C0002	**Correction Type**	Authorization
Adjustment Begin Date	07/01/2012	**Adjustment End Date**	07/07/2012
		Request Status	Calculated
Excel			

Client Payment Adjustments for a Request [Total Adjustment Amount: ($64.39)]

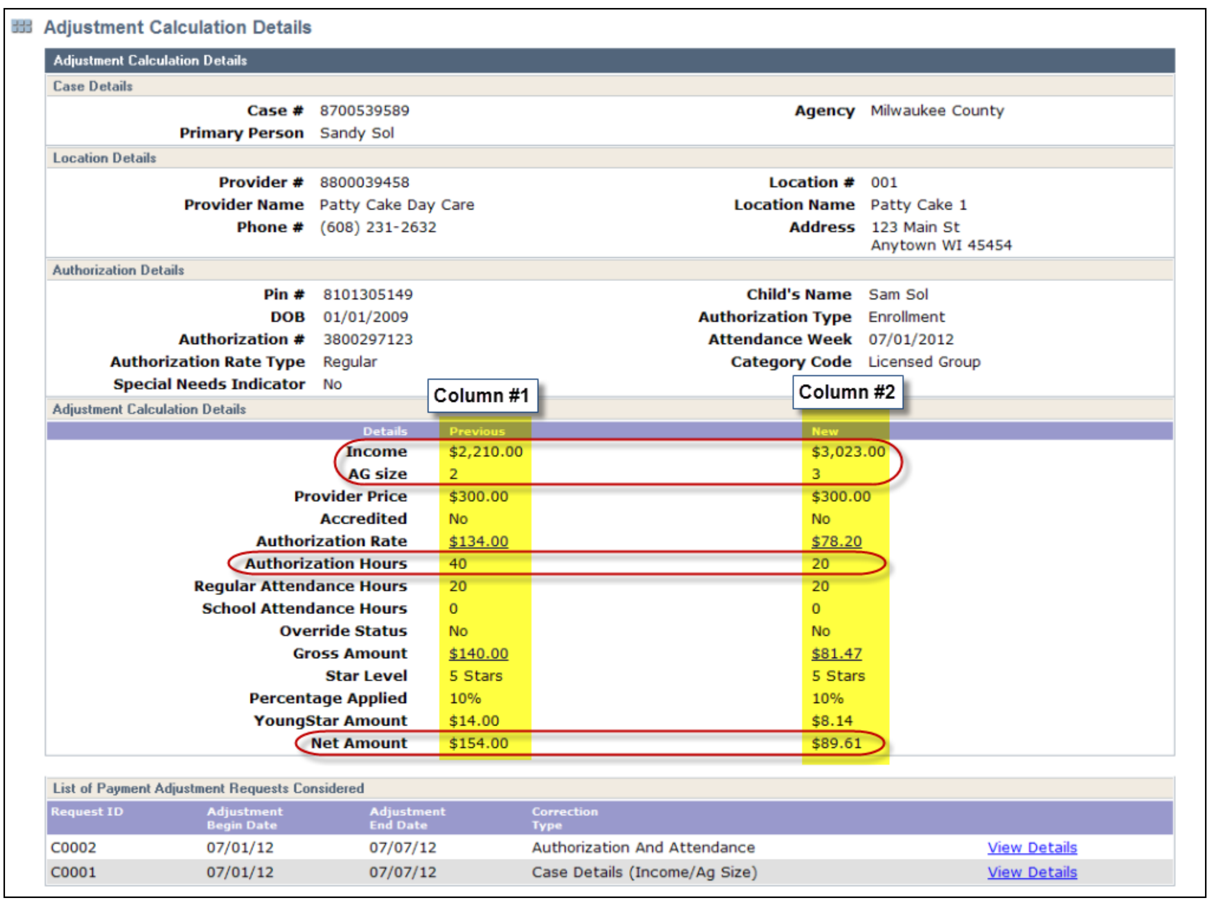
Provider #	Locn #	Child's Name	Attd Begin Date	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Delete
8800039458	001	Sam Sol	07/01/12	$140.00	$14.00	$154.00	$81.47	$8.14	$89.61	($64.39)	☐

Delete >

In the example below, Column 1 shows the Previous Issuance Amount Details as Income was $2,210, the Assistance Group (AG) was 2, and the Authorized Hours were 40.

Column 2 shows the new or adjusted Amount Details as Income was $3,023, the Assistance Group (AG) of 3, and the Authorized Hours of 20.

This screen also shows how the Adjustment Amount of $64.39 was calculated, which is the Previous Net Amount of $154.00 subtracted by the New Net Amount of $89.61.



Adjustment Calculation Details

Adjustment Calculation Details			
Case Details			
Case #	8700539589	**Agency**	Milwaukee County
Primary Person	Sandy Sol		
Location Details			
Provider #	8800039458	**Location #**	001
Provider Name	Patty Cake Day Care	**Location Name**	Patty Cake 1
Phone #	(608) 231-2632	**Address**	123 Main St Anytown WI 45454
Authorization Details			
Pin #	8101305149	**Child's Name**	Sam Sol
DOB	01/01/2009	**Authorization Type**	Enrollment
Authorization #	3800297123	**Attendance Week**	07/01/2012
Authorization Rate Type	Regular	**Category Code**	Licensed Group
Special Needs Indicator	No		

Adjustment Calculation Details

Details	Previous	New
Income	$2,210.00	$3,023.00
AG size	2	3
Provider Price	$300.00	$300.00
Accredited	No	No
Authorization Rate	$134.00	$78.20
Authorization Hours	40	20
Regular Attendance Hours	20	20
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$140.00	$81.47
Star Level	5 Stars	5 Stars
Percentage Applied	10%	10%
YoungStar Amount	$14.00	$8.14
Net Amount	$154.00	$89.61

List of Payment Adjustment Requests Considered

Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
C0002	07/01/12	07/07/12	Authorization And Attendance	View Details
C0001	07/01/12	07/07/12	Case Details (Income/Ag Size)	View Details

Further details of Authorization Rate and Gross Amount can be seen by clicking on the links.

Adjustment Calculation Details

Details	Previous	New
Income	$2,210.00	$3,023.00
AG size	2	3
Provider Price	$300.00	$300.00
Accredited	No	No
Authorization Rate	$134.00	$78.20
Authorization Hours	40	20
Regular Attendance Hours	20	20
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$140.00	$81.47
Star Level	5 Stars	5 Stars
Percentage Applied	10%	10%
YoungStar Amount	$14.00	$8.14
Net Amount	$154.00	$89.61

Modifications

Any modifications to the Client Payment Adjustment Request need to be done **before** the nightly adjustment calculation run and the Status shows Calculated.

Modifications can be made by selecting the Edit icon button in the List of Client Payment Adjustment Requests.

List of Client Payment Adjustment Requests

List of Client Payment Adjustment Requests

Case Details

Case # 1700470019 **Agency** Dane County

Primary Person Chevy Silverado

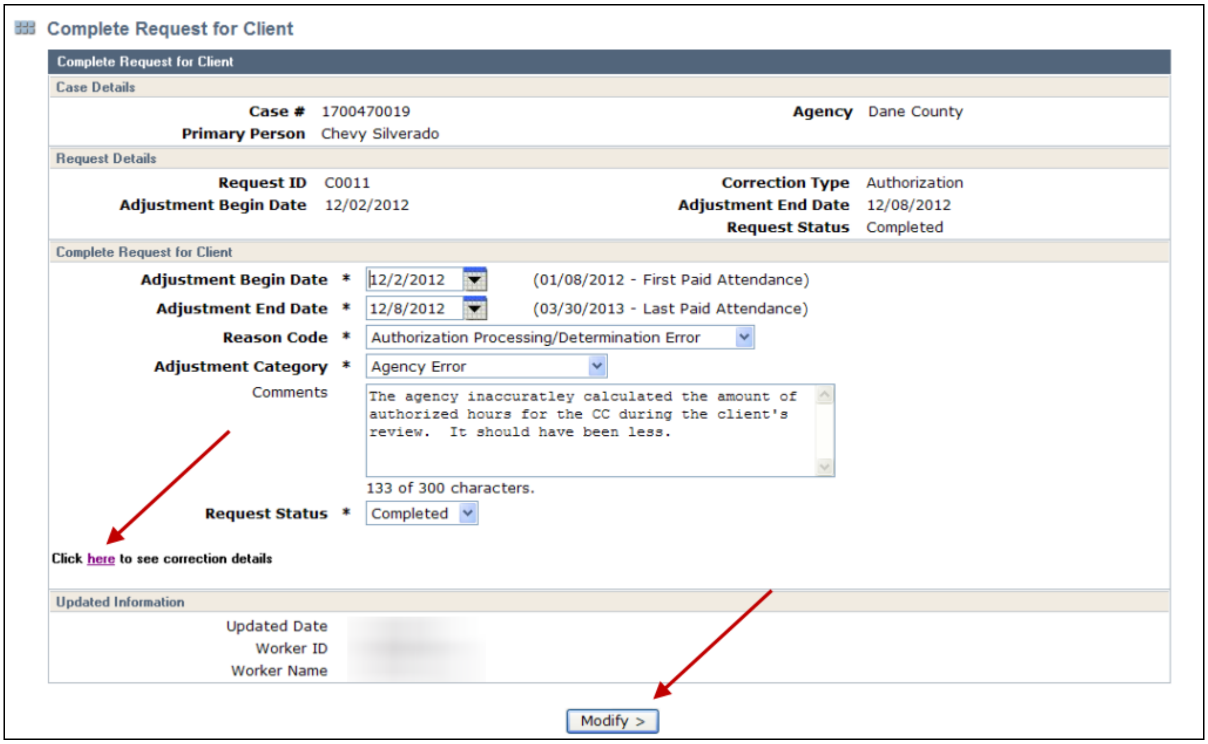
List of Client Payment Adjustment Requests Details

Request ID/ Comments	Adjustment Begin Date	Adjustment End Date	Correction Type	Status		Last Updated Date
C0011 The agency inaccuratley calculated the amount of authorized hours for the CC during the client's review. It should have been less.	12/02/12	12/08/12	Authorization	Completed	Continue Correction	07/10/13

New Client Payment Adjustment Request

Then select the highlighted word “here” to see further adjustment details and make corrections.

Select Modify when corrections are completed.

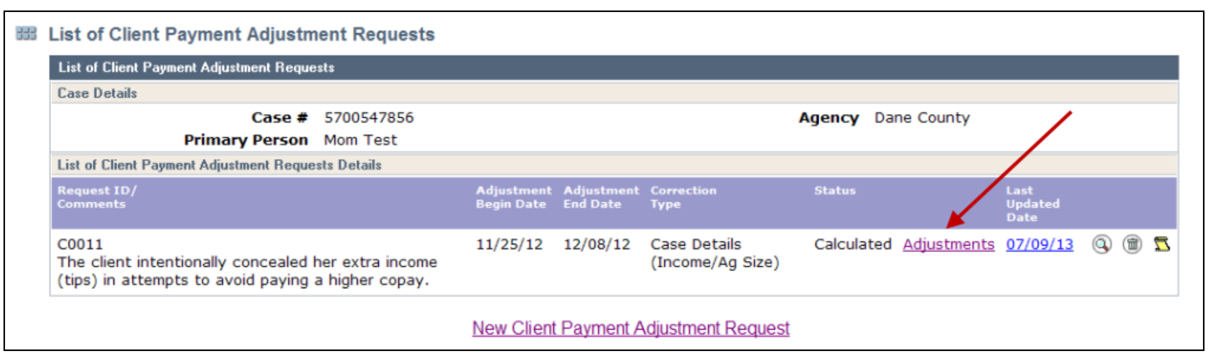


If adjustments were already calculated by the nightly batch run, adjustment details cannot be altered. The Client Payment Adjustment Request must be deleted and re-entered.

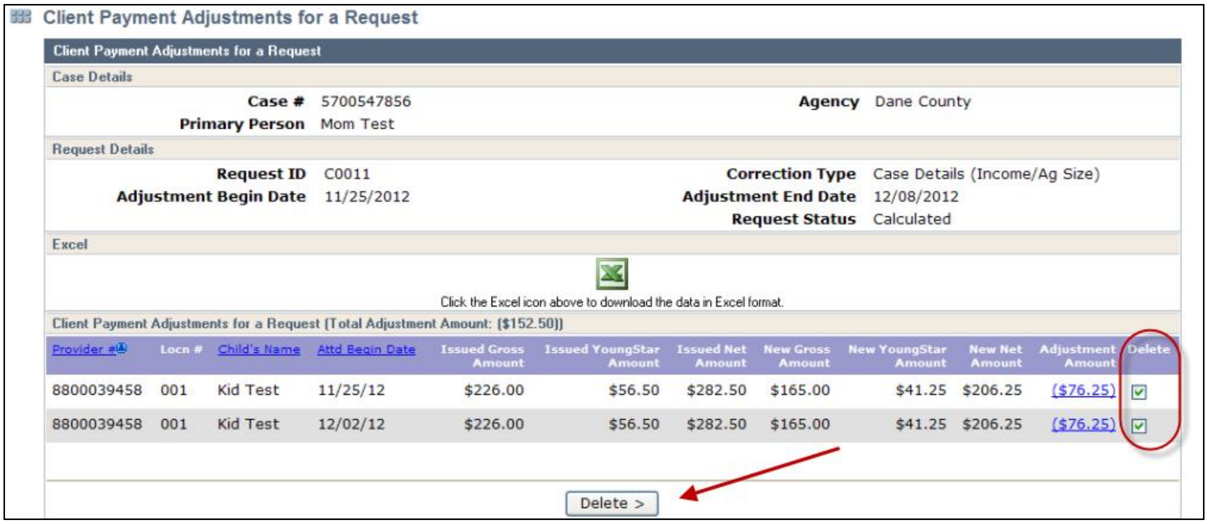
Deleting Calculated Client Adjustments

Refer to the **Client Related Adjustments** section on entering PIES, and search for the case that needs an adjustment deleted.

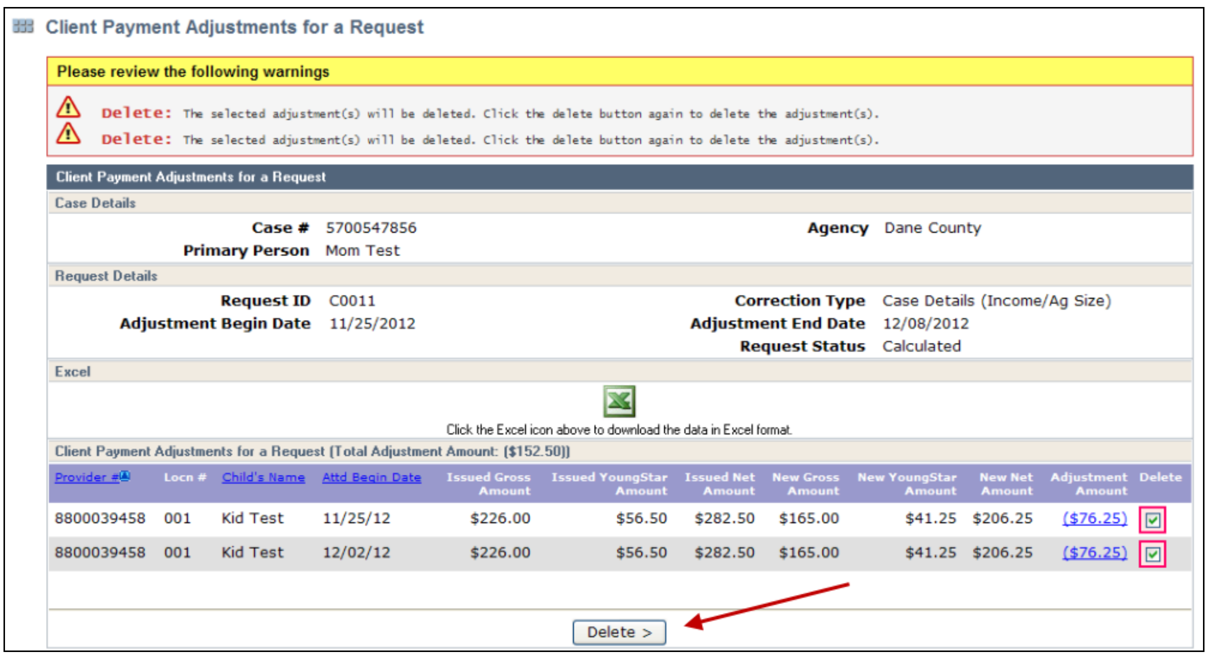
STEP 1 – Select the calculated adjustment that needs to be deleted by clicking on Adjustments.



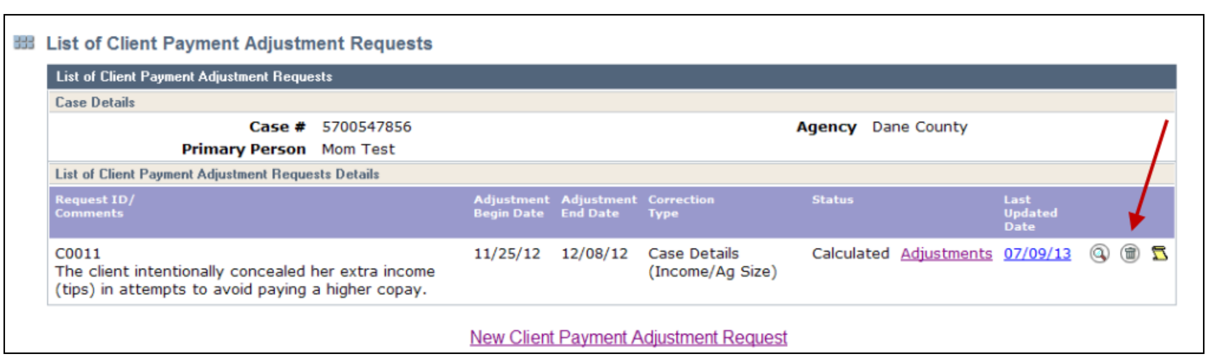
STEP 2 – Check the Delete box for all adjustments that need to be deleted and then select the Delete button.



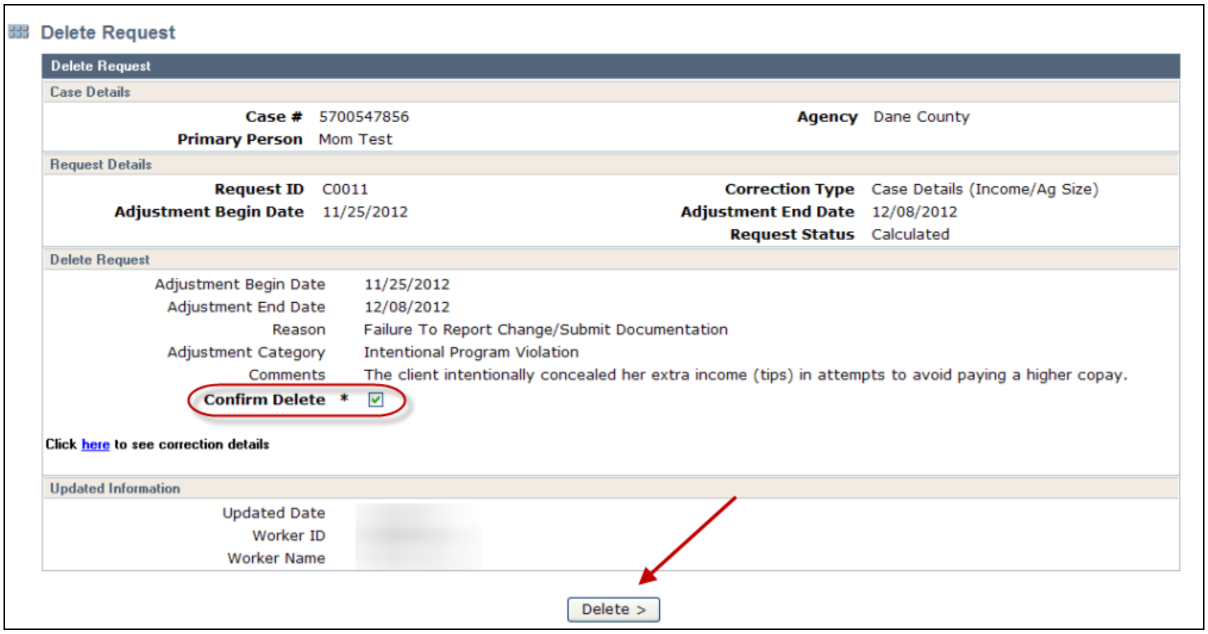
STEP 3 – Select the Delete button again to confirm that deletion of the adjustment.



STEP 4 – To finalize the deletion of the entire adjustment request, select the Garbage Can icon.



STEP 5 – Confirm deleting the entire request by checking the Confirm Delete box and select Delete.



Note: The process for modifying and deleting provider adjustments is the same.

Provider Related Adjustments

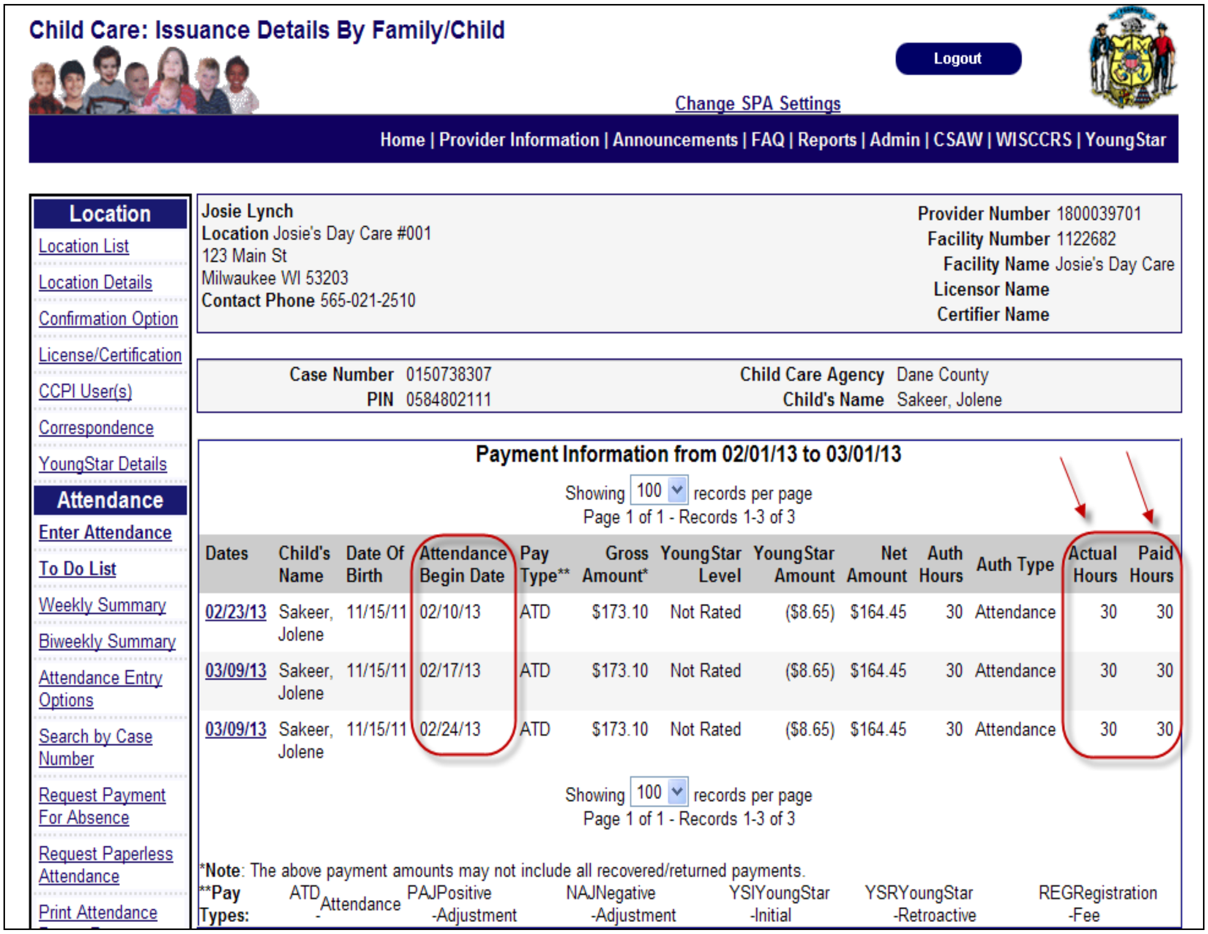
For a provider overpayment, a distinct advantage to using PIES is that it is much simpler to calculate overpayments that are due to incorrectly reported attendance. Although the overpayments are still tied to the individual authorization and the week of attendance, the worker will no longer need to know the payment calculation details in order to determine the overpayment amount.

PIES provider correction to attendance should only be used when the provider reports a past change in attendance. This functionality should NOT be used for auditing purposes. Please contact the Fraud Detection and Investigation Unit (FDIU) for further assistance on auditing providers.

Prior to beginning an attendance based overpayment calculation in PIES, the worker will need to know which authorization(s) and which week(s) of attendance were in error.

Provider Overpayment for Incorrect Attendance

In the example below, the child has an attendance-based authorization for 30 hours per week. The provider inaccurately reported 30 hours of attendance of the weeks beginning 2/10/13 and 2/17/13.



Child Care: Issuance Details By Family/Child

Logout

Change SPA Settings

Home | Provider Information | Announcements | FAQ | Reports | Admin | CSAW | WISCCRS | YoungStar

Location
- Location List
- Location Details
- Confirmation Option
- License/Certification
- CCPI User(s)
- Correspondence
- YoungStar Details

Attendance
- Enter Attendance
- To Do List
- Weekly Summary
- Biweekly Summary
- Attendance Entry Options
- Search by Case Number
- Request Payment For Absence
- Request Paperless Attendance
- Print Attendance

Josie Lynch
Location Josie's Day Care #001
123 Main St
Milwaukee WI 53203
Contact Phone 565-021-2510

Provider Number 1800039701
Facility Number 1122682
Facility Name Josie's Day Care
Licensor Name
Certifier Name

Case Number 0150738307
PIN 0584802111
Child Care Agency Dane County
Child's Name Sakeer, Jolene

Payment Information from 02/01/13 to 03/01/13

Showing 100 records per page
Page 1 of 1 - Records 1-3 of 3

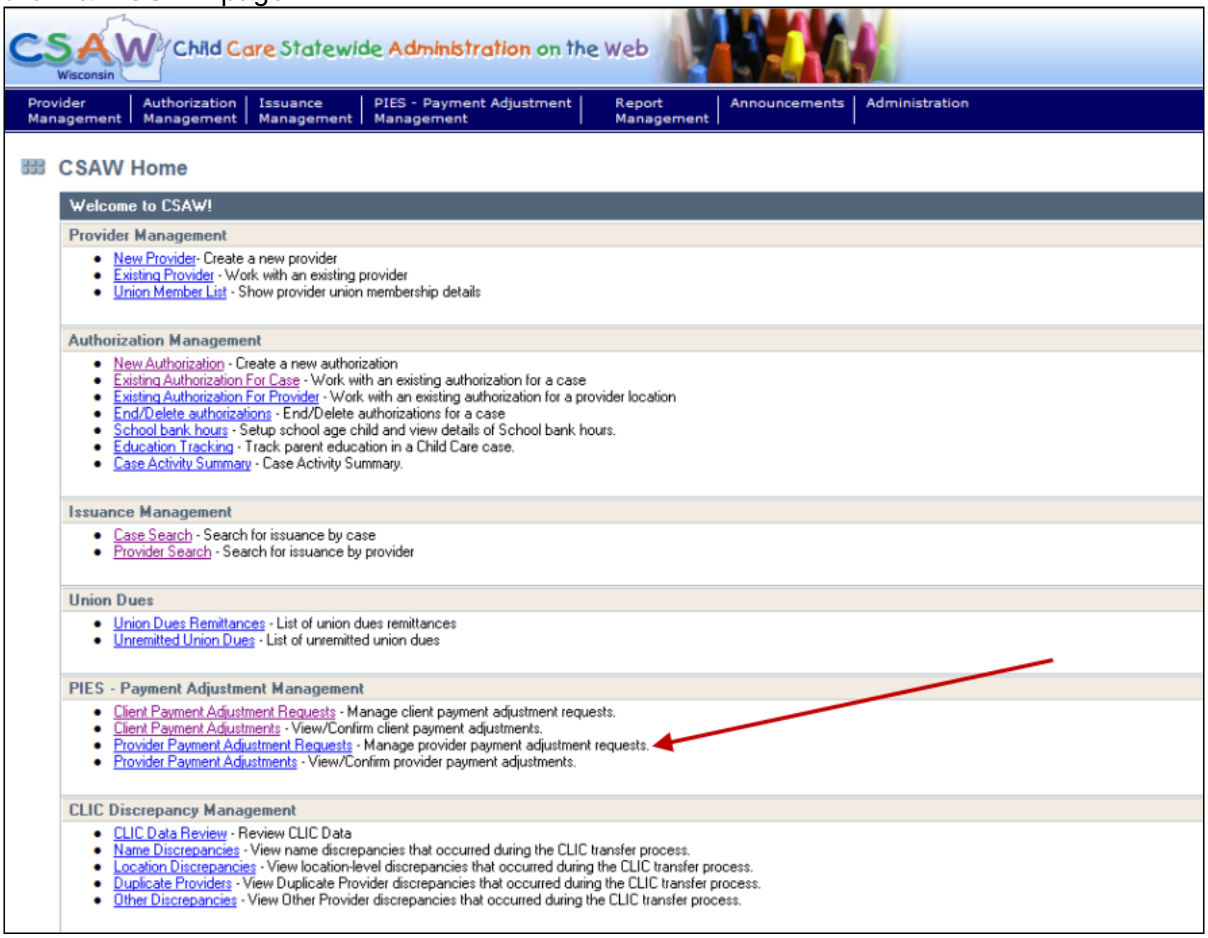
Dates	Child's Name	Date Of Birth	Attendance Begin Date	Pay Type**	Gross Amount*	YoungStar Level	YoungStar Amount	Net Amount	Auth Hours	Auth Type	Actual Hours	Paid Hours
02/23/13	Sakeer, Jolene	11/15/11	02/10/13	ATD	$173.10	Not Rated	($8.65)	$164.45	30	Attendance	30	30
03/09/13	Sakeer, Jolene	11/15/11	02/17/13	ATD	$173.10	Not Rated	($8.65)	$164.45	30	Attendance	30	30
03/09/13	Sakeer, Jolene	11/15/11	02/24/13	ATD	$173.10	Not Rated	($8.65)	$164.45	30	Attendance	30	30

Showing 100 records per page
Page 1 of 1 - Records 1-3 of 3

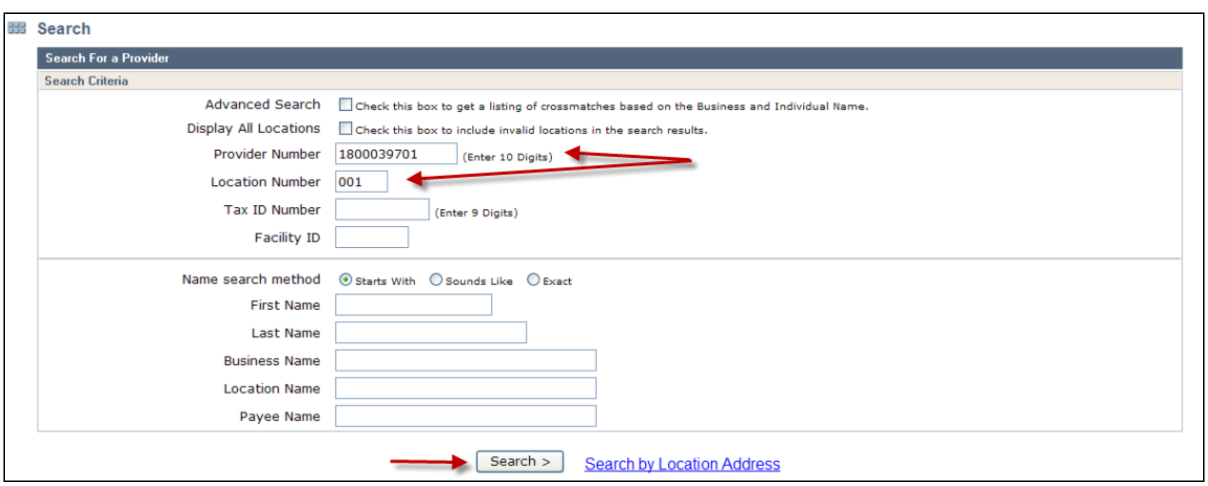
*Note: The above payment amounts may not include all recovered/returned payments.
**Pay Types: ATD-Attendance PAJ-Positive Adjustment NAJ-Negative Adjustment YSI-YoungStar Initial YSR-YoungStar Retroactive REG-Registration Fee

The provider reported to the agency that child did not actually start attending until halfway through the second week and that she billed inaccurately. The hours that the child actually attended should have been 0 hours for the week of 2/10/13 and 12 hours for the week of 2/17/13.

To begin the adjustment calculation click on the **Provider Payment Adjustment Requests** on the main CSAW page.

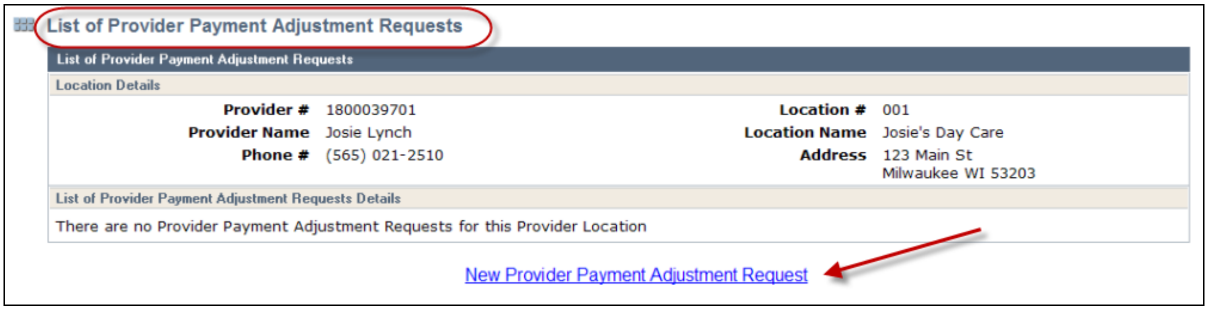


Search for a provider by entering in the provider information and select Search. The fastest way to find a provider is by using the Provider Number and Location Number; however, if that information is not available you can search for a provider using any of the fields on the page.

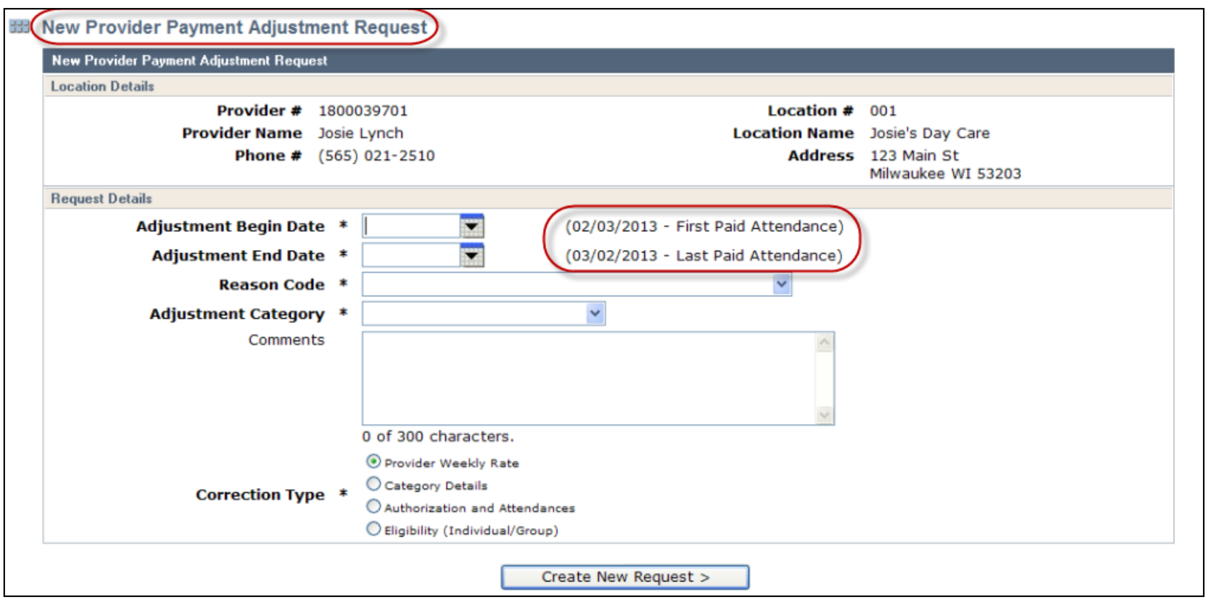


The **List of Provider Payment Adjustment Requests** page shows the Location Detail summary of the provider that was searched for as well as lists all current payment adjustment calculations done in PIES, if any exist.

To start a new adjustment request, click on **New Provider Payment Adjustment Request**.



The **New Provider Payment Adjustment Request** page shows the “First Paid Attendance” and the “Last paid Attendance”. Payment adjustments can only be made between (and including) these dates.



Prior to beginning a provider adjustment, you will need to know if the overpayment was due to incorrect reporting of provider’s weekly rate, category details, authorization and attendance, or eligibility details.

In this example, the provider reported that the child did not attend the week of 02/10/13, attended only 12 hours for the week of 02/17/13, but billed for 30 hours each those weeks.

STEP 1 – Enter the following information on the New Provider Payment Adjustment Request Screen.

1. **Adjustment Time Frame**
   - Adjustment Begin Date is the Sunday of the first attendance week for which there was a possible incorrect issuance.
   - Adjustment End Date is the Saturday of the last attendance week for which there was a possible incorrect issuance.

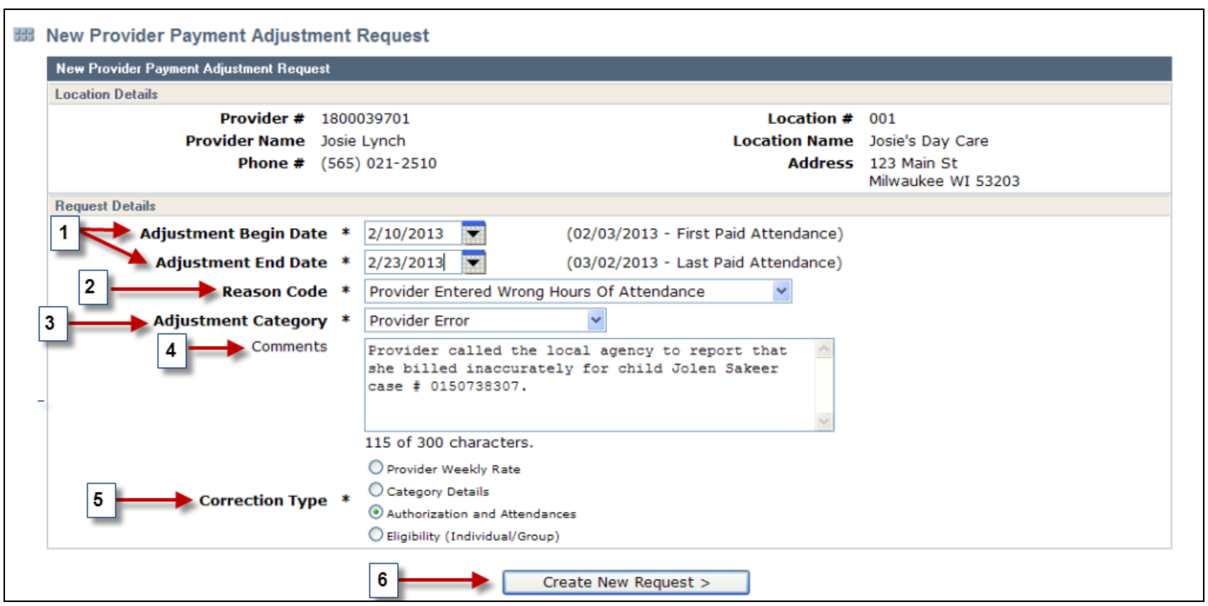
2. **Reason Code** – select the most accurate description from the drop down list as to the reason for which an incorrect issuance occurred. This reason will be displayed on the provider adjustment notices.

3. **Adjustment Category** – indicates who is responsible for the overpayment and the rate of recoupment from the provider if they are active and still receiving Wisconsin Shares payments.
   - Agency Error
   - Provider Error
   - Intentional Program Violation

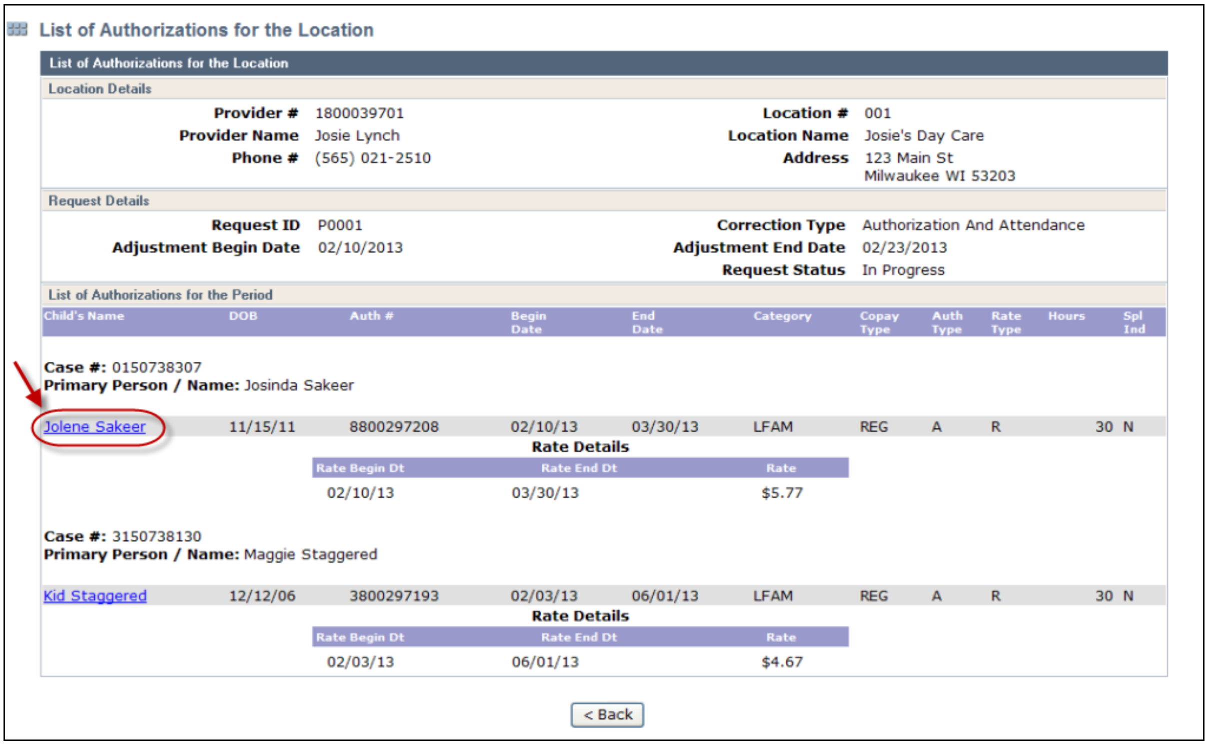
4. **Comments** – briefly explain the nature of the overpayment. If there are multiple children in a case, enter the child's name in the comments.

5. **Correction Type** – indicates the type of error that occurred. In this example it is Authorization and Attendance.

6. **Select** Create New Request.



STEP 2 – Select the child's or children's name whose hours need to be adjusted on the **List of Authorizations** for the Location screen.


List of Authorizations for the Location

List of Authorizations for the Location

Location Details

Provider #	1800039701	**Location #**	001
Provider Name	Josie Lynch	**Location Name**	Josie's Day Care
Phone #	(565) 021-2510	**Address**	123 Main St Milwaukee WI 53203

Request Details

Request ID	P0001	**Correction Type**	Authorization And Attendance
Adjustment Begin Date	02/10/2013	**Adjustment End Date**	02/23/2013
		Request Status	In Progress

List of Authorizations for the Period

Child's Name	DOB	Auth #	Begin Date	End Date	Category	Copay Type	Auth Type	Rate Type	Hours	Spl Ind
Case #: 0150738307 **Primary Person / Name:** Josinda Sakeer										
Jolene Sakeer	11/15/11	8800297208	02/10/13	03/30/13	LFAM	REG	A	R	30	N
Case #: 3150738130 **Primary Person / Name:** Maggie Staggered										
Kid Staggered	12/12/06	3800297193	02/03/13	06/01/13	LFAM	REG	A	R	30	N

Rate Details (Jolene Sakeer)

Rate Begin Dt	Rate End Dt	Rate
02/10/13	03/30/13	$5.77

Rate Details (Kid Staggered)

Rate Begin Dt	Rate End Dt	Rate
02/03/13	06/01/13	$4.67

< Back

STEP 3 – Enter the following information on the **Correct Authorization/Attendance Detail for Case Payment Adjustment** screen.

1. **Authorized Hours** for the child for the whole adjustment request timeframe if each week is the same number. Enter the hours and check the box if you need to make any changes to authorized amount of hours if applicable. This will fill in the authorized hours for all weeks of the adjustment or you can change the Authorized hours by doing it individually like in number 2 (below).

2. **Authorized Hours** for the child each week, if the authorized amounts of hour vary each week of the adjustment timeframe. **In this example, the child was authorized for 30 hours for the overpayment timeframe and that information will not need to be altered for the Provider Overpayment.**

3. **Copay Type** for child for the whole adjustment request timeframe if each week is the same copay type. Enter the new copay type and check the box if you need to make any changes to the copay type applicable. This will fill in the copay type for all weeks of the adjustment or you can change the copay type by doing in individually like in number 4 (below).

4. **Copay Types** for the child each week, if the copay type varies each week of the adjustment timeframe.

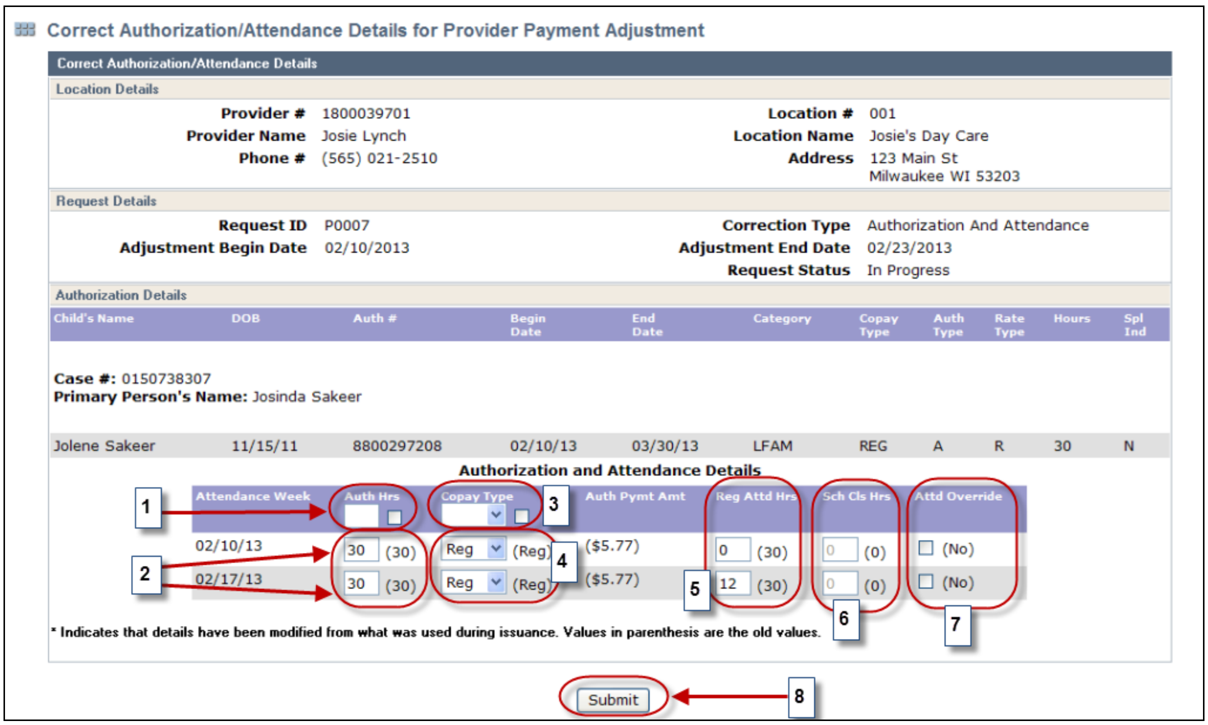
5. **Regular Attended Hours** for the child each week. In this example, 0 is entered for the week of 2/10/13 since the child did not attend and 12 hours is entered for the week of

2/17/13. The hours that had been reported by the provider and used for the issuance appear in parenthesis next to the entry boxes.

6. **School Close Hours** for the child each week, if applicable. In this example, the child is not school age and does not have any school closed hours to use or alter.

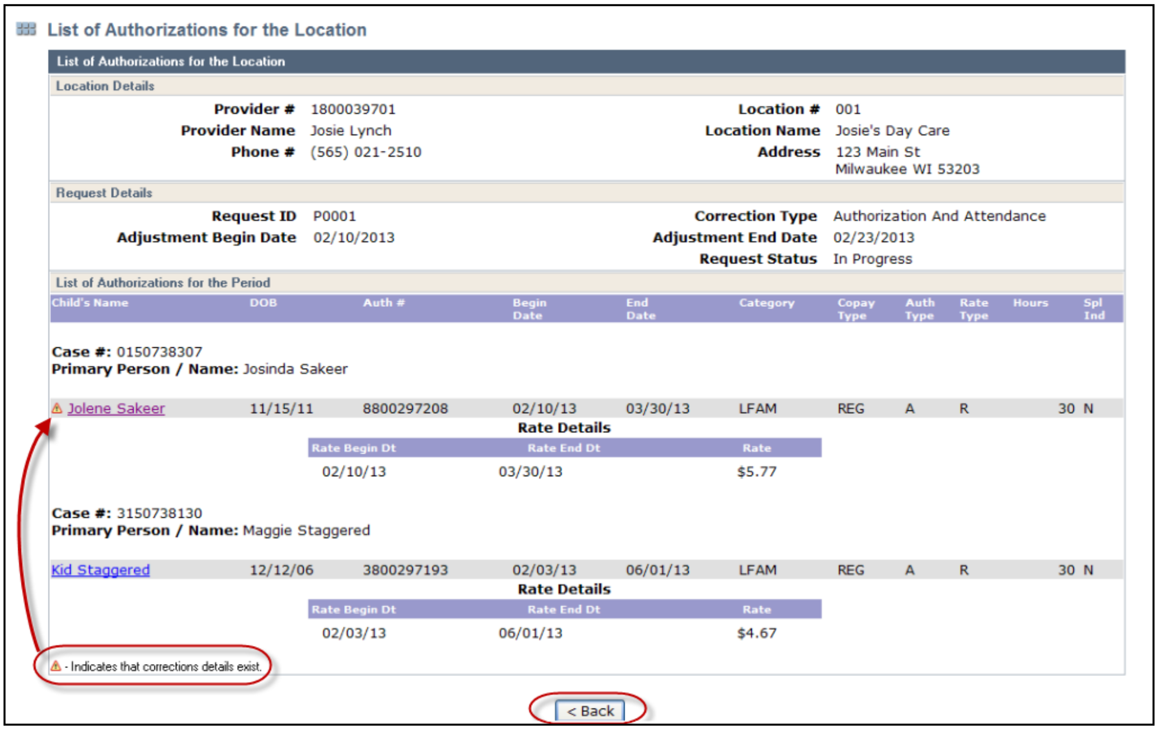
7. **Attendance Override** for the child to be entered when the Provider and Client reported that the child attended more than authorized hours for an attendance period in the past. Like in an instance where the client worked overtime. For the example below, we would not use this functionality.

8. **Select** Submit.



List of Authorization for the Location

The informational symbol to the left of the child's name indicates that the details of authorization/attendance have been changed for this child. If no other changes have to be made for this child, click on the Back button.

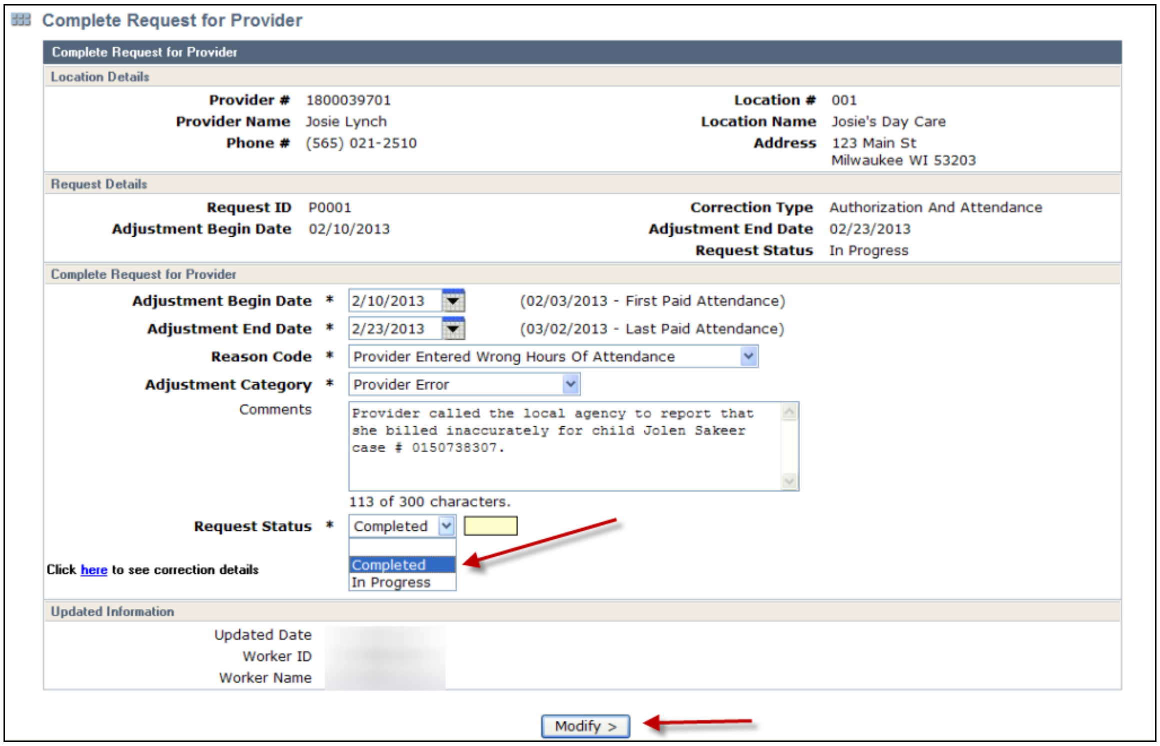


Mark as Completed and Prep for Overnight Processing

STEP 4 – Complete the Adjustment Request by selecting the Edit icon.

STEP 5 –

1. Change the Request Status from In Progress to Completed
2. Select Modify to submit the status change.



STEP 6 – The completed request will process overnight.

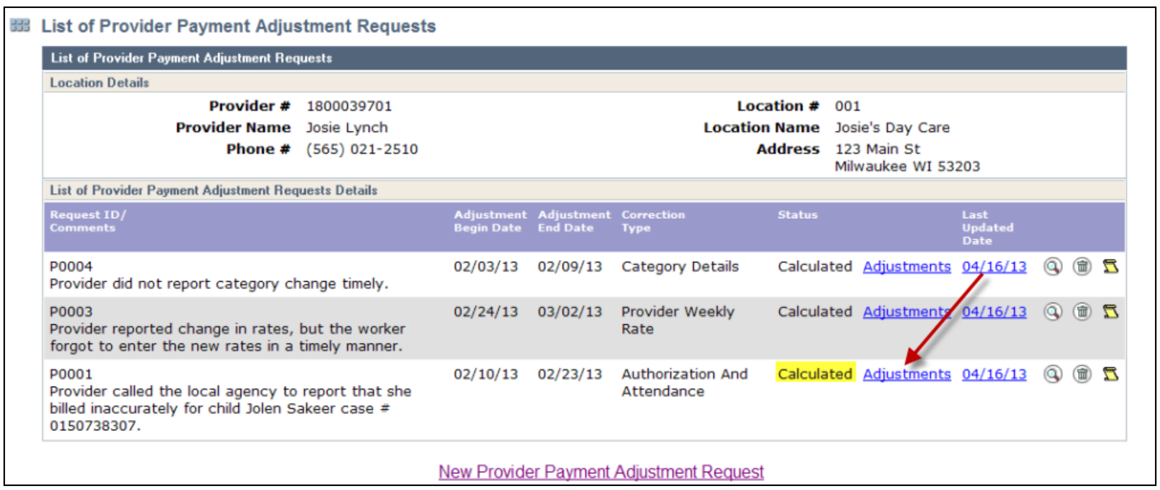
Note that the status is Completed. This means the payment adjustment request has been entered, but has not yet been calculated and processed.

The Next Day: What to Process

STEP 7 – View the calculations by entering PIES and selecting Provider Payment Adjustment Requests.

STEP 8 – Search by Provider and Location Number and select Search.

STEP 9 – View the calculated adjustments by clicking on Adjustments. Note that the Status is Calculated.



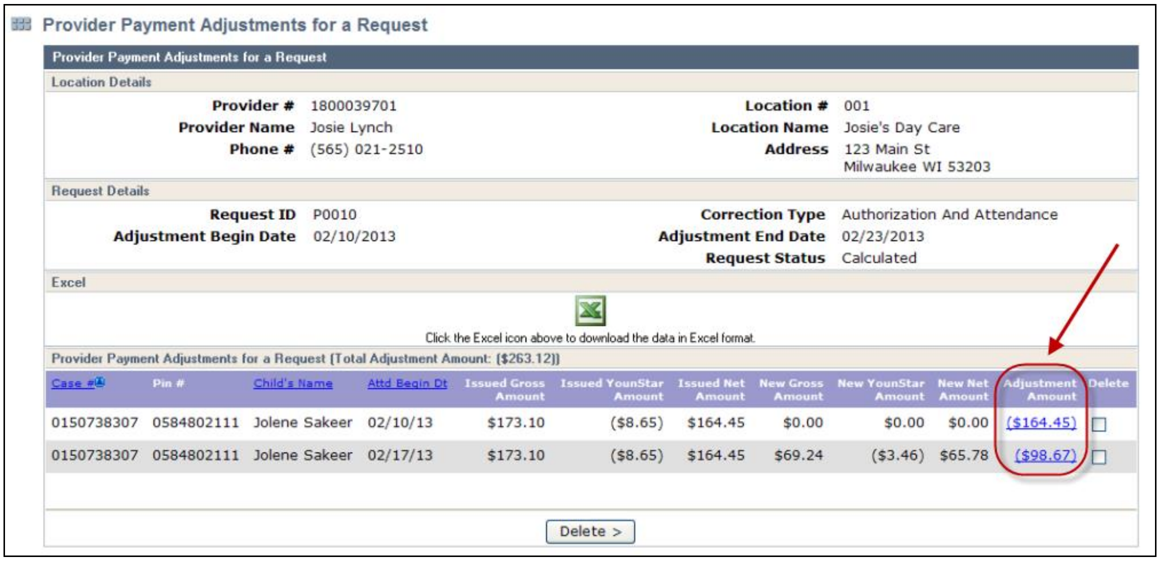
This will show the individual weeks for which an overpayment has been calculated.

The system shows the Issued Net Amount (original amount paid), the New Net Amount (the correct amount that should have been paid), and the Adjustment Amount (the overpayment or underpayment for each week of attendance).

STEP 10 – Confirm the Adjustments by following the **Confirming Provider Adjustment Calculation** section at the end of this manual. This process will enter the adjustments automatically into the system. **OR**

You can enter the adjustments manually into CSAW by following the instructions as outlined in the CSAW Issuance User Guide.

http://dcf.wisconsin.gov/childcare/wishares/CSAW/pdf/csawissuance.pdf


Provider Payment Adjustments for a Request

Provider Payment Adjustments for a Request

Location Details

Provider # 1800039701
Provider Name Josie Lynch
Phone # (565) 021-2510
Location # 001
Location Name Josie's Day Care
Address 123 Main St
Milwaukee WI 53203

Request Details

Request ID P0010
Adjustment Begin Date 02/10/2013
Correction Type Authorization And Attendance
Adjustment End Date 02/23/2013
Request Status Calculated

Excel

Click the Excel icon above to download the data in Excel format.

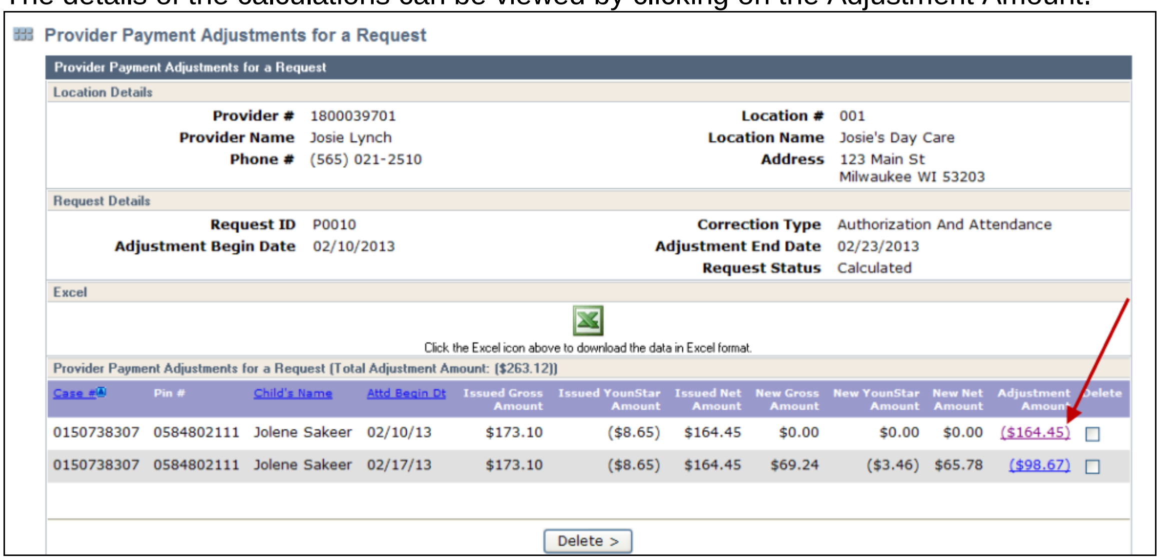
Provider Payment Adjustments for a Request (Total Adjustment Amount: ($263.12))

Case #	Pin #	Child's Name	Attd Begin Dt	Issued Gross Amount	Issued YounStar Amount	Issued Net Amount	New Gross Amount	New YounStar Amount	New Net Amount	Adjustment Amount	Delete
0150738307	0584802111	Jolene Sakeer	02/10/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☐
0150738307	0584802111	Jolene Sakeer	02/17/13	$173.10	($8.65)	$164.45	$69.24	($3.46)	$65.78	($98.67)	☐

Delete >

When entering adjustments manually, if the Adjustment Amount is in parentheses, you will enter a negative adjustment into CSAW. If the amount is not in parentheses, you will enter a positive adjustment into CSAW.

The details of the calculations can be viewed by clicking on the Adjustment Amount.


Provider Payment Adjustments for a Request

Provider Payment Adjustments for a Request

Location Details

Provider # 1800039701
Provider Name Josie Lynch
Phone # (565) 021-2510
Location # 001
Location Name Josie's Day Care
Address 123 Main St
Milwaukee WI 53203

Request Details

Request ID P0010
Adjustment Begin Date 02/10/2013
Correction Type Authorization And Attendance
Adjustment End Date 02/23/2013
Request Status Calculated

Excel

Click the Excel icon above to download the data in Excel format.

Provider Payment Adjustments for a Request (Total Adjustment Amount: ($263.12))

Case #	Pin #	Child's Name	Attd Begin Dt	Issued Gross Amount	Issued YounStar Amount	Issued Net Amount	New Gross Amount	New YounStar Amount	New Net Amount	Adjustment Amount	Delete
0150738307	0584802111	Jolene Sakeer	02/10/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☐
0150738307	0584802111	Jolene Sakeer	02/17/13	$173.10	($8.65)	$164.45	$69.24	($3.46)	$65.78	($98.67)	☐

Delete >

The **Adjustment Calculation Details** page shows the change made to the attendance that resulted in a decrease in the payment.

In the below example, the worker can compare the “Previous” and “New” calculations to clearly see how the adjustment was calculated.

Adjustment Calculation Details

Adjustment Calculation Details

Case Details

Case #	0150738307	**Agency**	Dane County
Primary Person	Josinda Sakeer		

Location Details

Provider #	1800039701	**Location #**	001
Provider Name	Josie Lynch	**Location Name**	Josie's Day Care
Phone #	(565) 021-2510	**Address**	123 Main St Milwaukee WI 53203

Authorization Details

Pin #	0584802111	**Child's Name**	Jolene Sakeer
DOB	11/15/2011	**Authorization Type**	Attendance
Authorization #	8800297208	**Attendance Week**	02/10/2013
Authorization Rate Type	Regular	**Category Code**	Licensed Family
Special Needs Indicator	No		

Adjustment Calculation Details

Details	Previous	New
Income	$0.00	$0.00
AG size	2	2
Provider Price	$200.00	$200.00
Accredited	No	No
Authorization Rate	$5.77	$5.77
Authorization Hours	30	30
Regular Attendance Hours	30	0
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$173.10	$0.00
Star Level	N/A	N/A
Percentage Applied	-5%	N/A
YoungStar Amount	($8.65)	$0.00
Net Amount	$164.45	$0.00

List of Payment Adjustment Requests Considered

Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
P0001	02/10/13	02/23/13	Authorization And Attendance	View Details

< Back

This screen also shows how the Adjustment Amount of $164.45 was calculated, which is simply the Previous Net Amount of $164.45 subtracted by the New Net Amount of $0.00.

Details on the rate calculation can be viewed by clicking on the Authorized Rate and details on the issuance calculations can be viewed by clicking on the Gross Amount.

Adjustment Calculation Details

Details	Previous	New
Income	$0.00	$0.00
AG size	2	2
Provider Price	$200.00	$200.00
Accredited	No	No
Authorization Rate	$5.77	$5.77
Authorization Hours	30	30
Regular Attendance Hours	30	0
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$173.10	$0.00
Star Level	N/A	N/A
Percentage Applied	-5%	N/A
YoungStar Amount	($8.65)	$0.00
Net Amount	$164.45	$0.00

List of Payment Adjustment Requests Considered

Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
P0001	02/10/13	02/23/13	Authorization And Attendance	View Details

Payment Adjustment Request Due to Incorrect Provider Rate

1. Click on the **Provider Payment Requests** link underneath the PIES heading.
2. Search for a provider by using the Provider and Location number.
3. Select **New Provider Payment Adjustment Request** on the **List of Provider Payment Adjustment Requests**.

In the example below, the provider reported that the regular rate increased from $200 per week to $250 per week and the part time rate increased from $100 per week to $150 per week effective 2/24/13, but the worker forgot to enter the updated rates.

STEP 1 – Enter the following information on the **New Provider Payment Adjustment Request Screen**.

1. **Adjustment Time Frame**
   - Adjustment Begin Date is the Sunday of the first attendance week for which there was a possible incorrect issuance.
   - Adjustment End Date is the Saturday of the last attendance week for which there was a possible incorrect issuance.

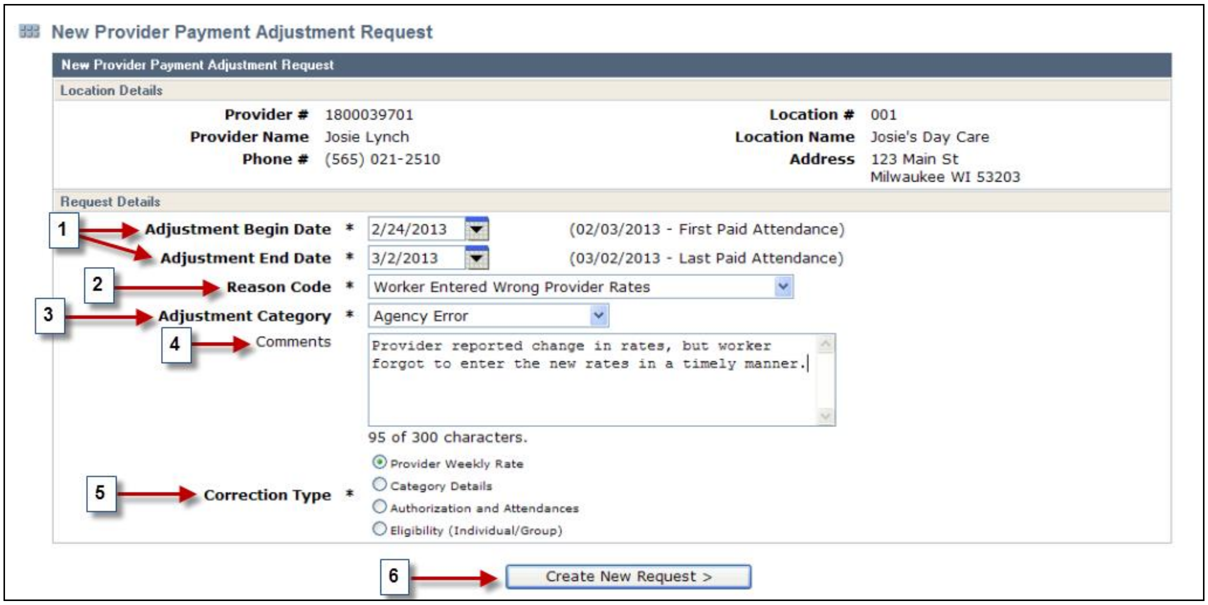
2. **Reason Code** – select the most accurate description from the drop down list as the reason for which an incorrect issuance occurred.

3. **Adjustment Category** – indicates who is responsible for the overpayment and the rate of recoupment from the provider if they are active and still receiving Wisconsin Shares payments.
   - Agency Error
   - Provider Error
   - Intentional Program Violation

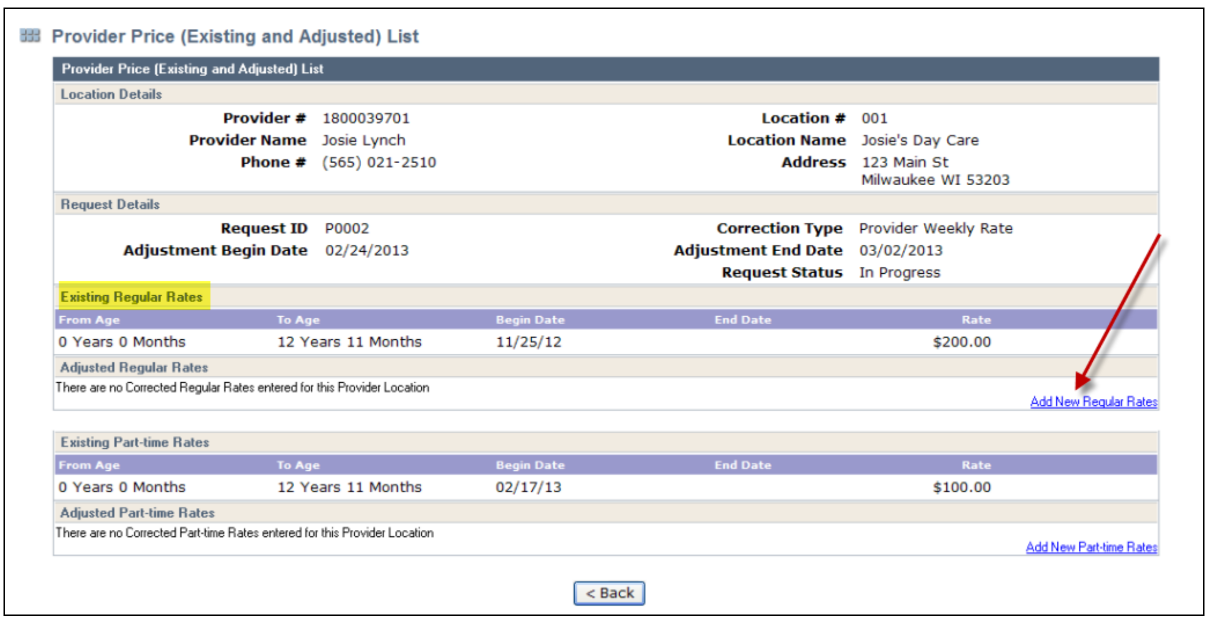
4. **Comments** – briefly explain the nature of the overpayment. If there are multiple children in a case, enter the child's name in the comments.

5. **Correction Type** – indicates the type of error that occurred. In this example it is **Provider Weekly Rate**.

6. **Select** Create New Request.



STEP 2 – On the **Provider Price (Existing and Adjusted) List** select Add New Regular Rates.



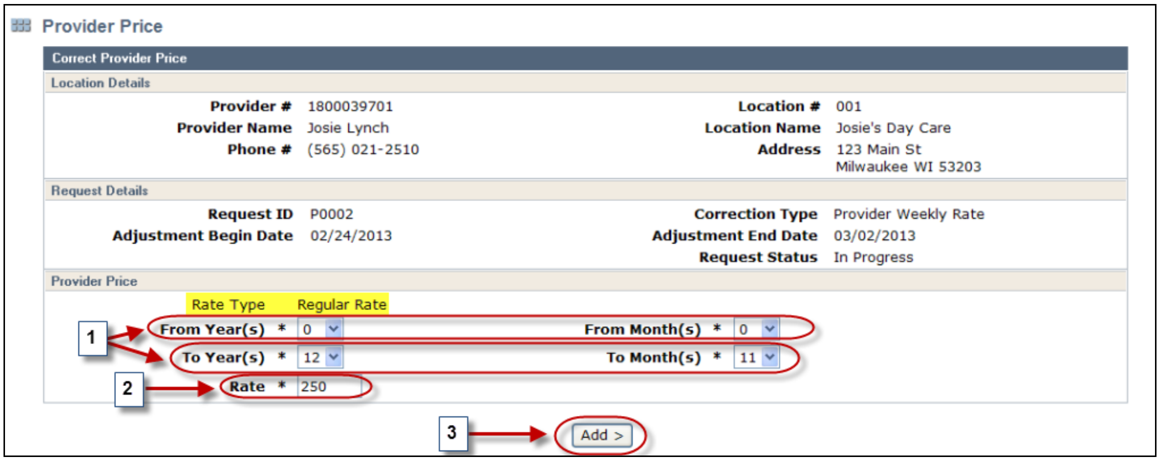
<u>**STEP 3**</u> – Enter the correct **Provider Price** information.

1. Age Group Served
   - From Year(s) and Month(s). In this example, the From Year is 0 years and 0 months.
   - To Year(s) and Month(s). In this example, the To Year is 12 years and 11 months.

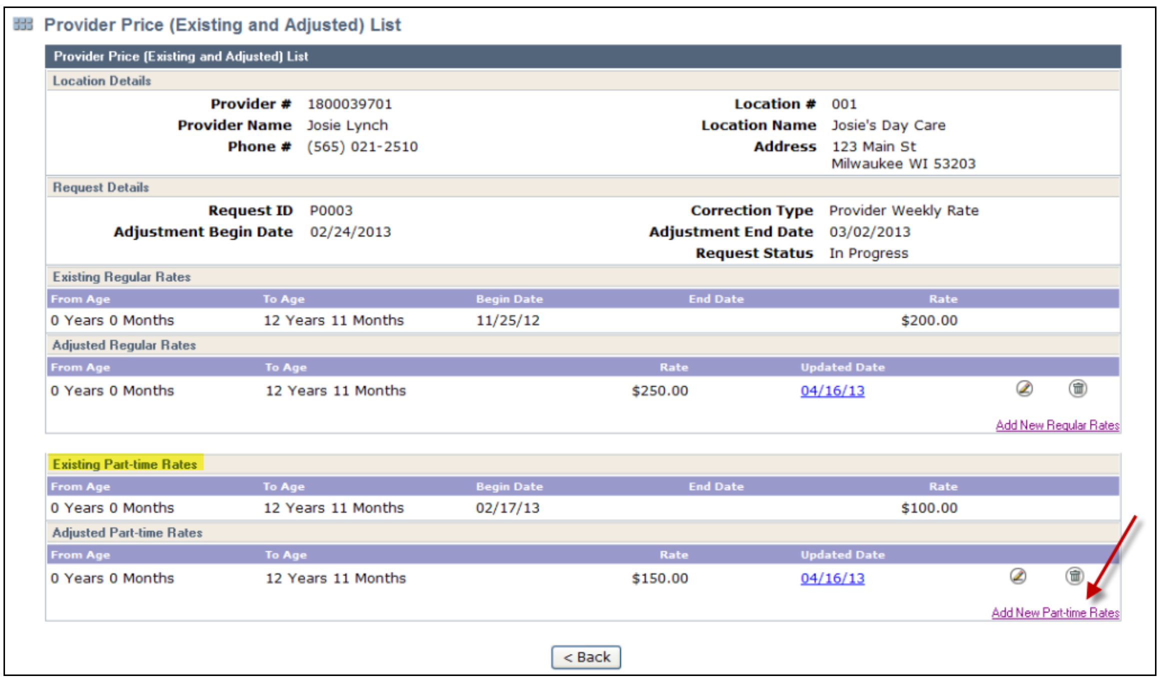
2. The new weekly Rate for full time children. In this example, the Provider weekly increased from $200 to $250.

3. Select Add.

Note: The rate information on this page is used only to calculate an over/under payment. It does not update the provider's rates in the Provider Management section.



STEP 4 – Click on Add New Part-time Rates.



STEP 5 – Enter the **Correct Provider Price** information.

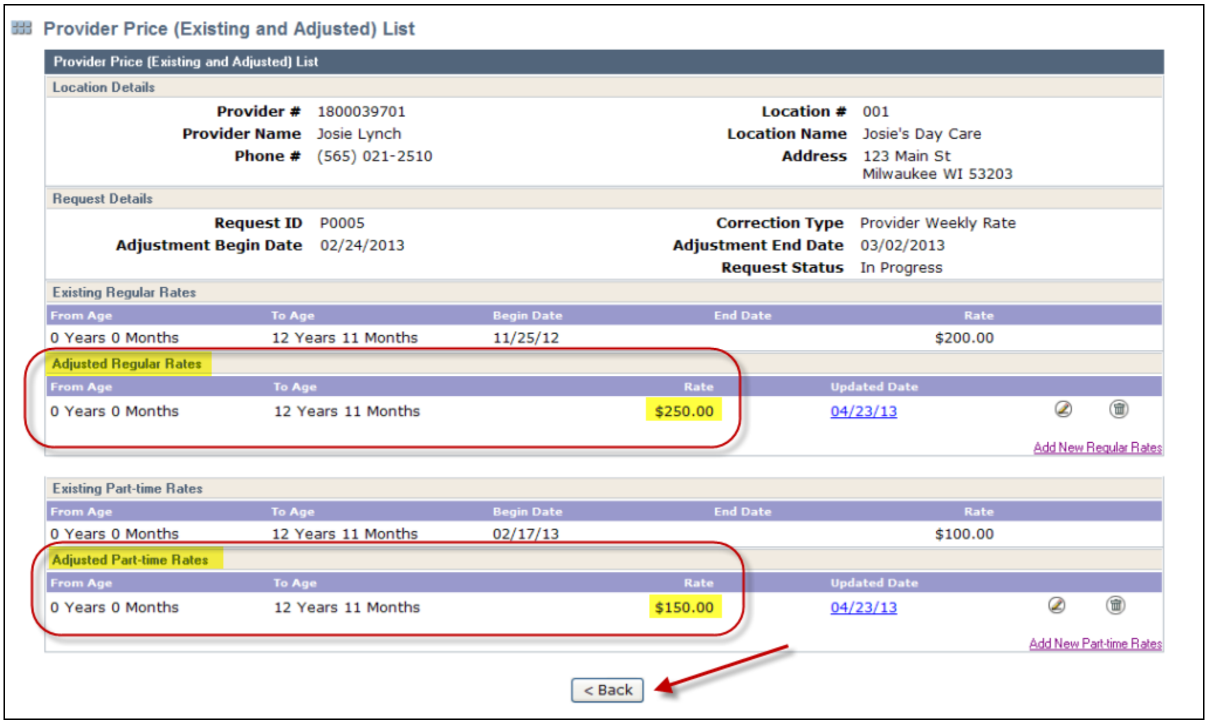
1. Age Group Served
   - From Year(s) and Month(s). In this example, the From Year is 0 years and 0 months.
   - To Year(s) and Month(s). In this example, the To Year is 12 years and 11 months.

2. The new weekly Rate for part time children. In this example, the provider weekly increased from $100 to $150.

3. Select Add.

Note: The rate information on this page is used only to calculate the over/underpayment. It does not update the provider's rates in the Provider Management section.

STEP 6 – Select the back button when corrections are completed.



Provider Price (Existing and Adjusted) List

Provider Price (Existing and Adjusted) List

Location Details

Provider #	1800039701	**Location #**	001
Provider Name	Josie Lynch	**Location Name**	Josie's Day Care
Phone #	(565) 021-2510	**Address**	123 Main St Milwaukee WI 53203

Request Details

Request ID	P0005	**Correction Type**	Provider Weekly Rate
Adjustment Begin Date	02/24/2013	**Adjustment End Date**	03/02/2013
		Request Status	In Progress

Existing Regular Rates

From Age	To Age	Begin Date	End Date	Rate
0 Years 0 Months	12 Years 11 Months	11/25/12		$200.00

Adjusted Regular Rates

From Age	To Age	Rate	Updated Date
0 Years 0 Months	12 Years 11 Months	$250.00	04/23/13

Add New Regular Rates

Existing Part-time Rates

From Age	To Age	Begin Date	End Date	Rate
0 Years 0 Months	12 Years 11 Months	02/17/13		$100.00

Adjusted Part-time Rates

From Age	To Age	Rate	Updated Date
0 Years 0 Months	12 Years 11 Months	$150.00	04/23/13

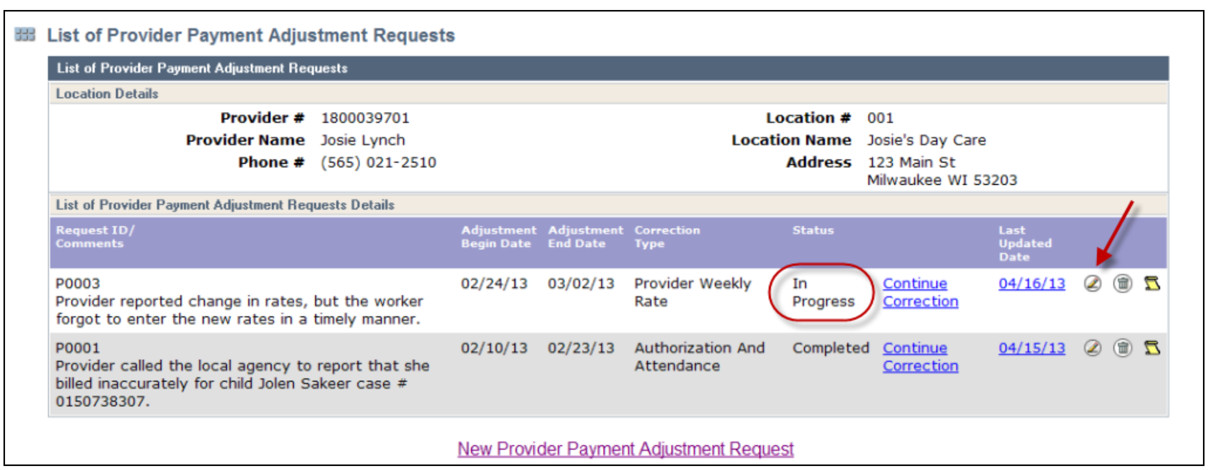
Add New Part-time Rates

< Back

Complete Request

STEP 7 – Change the Request Status from In Progress to Completed by clicking on the Edit Icon.

*Review **Mark as Completed for Overnight Processing** steps on page 41 for further details.



List of Provider Payment Adjustment Requests

List of Provider Payment Adjustment Requests

Location Details

Provider #	1800039701	**Location #**	001
Provider Name	Josie Lynch	**Location Name**	Josie's Day Care
Phone #	(565) 021-2510	**Address**	123 Main St Milwaukee WI 53203

List of Provider Payment Adjustment Requests Details

Request ID/ Comments	Adjustment Begin Date	Adjustment End Date	Correction Type	Status		Last Updated Date
P0003 Provider reported change in rates, but the worker forgot to enter the new rates in a timely manner.	02/24/13	03/02/13	Provider Weekly Rate	In Progress	Continue Correction	04/16/13
P0001 Provider called the local agency to report that she billed inaccurately for child Jolen Sakeer case # 0150738307.	02/10/13	02/23/13	Authorization And Attendance	Completed	Continue Correction	04/15/13

New Provider Payment Adjustment Request

STEP 8 – The completed request will process overnight.

The Next Day: What to Process

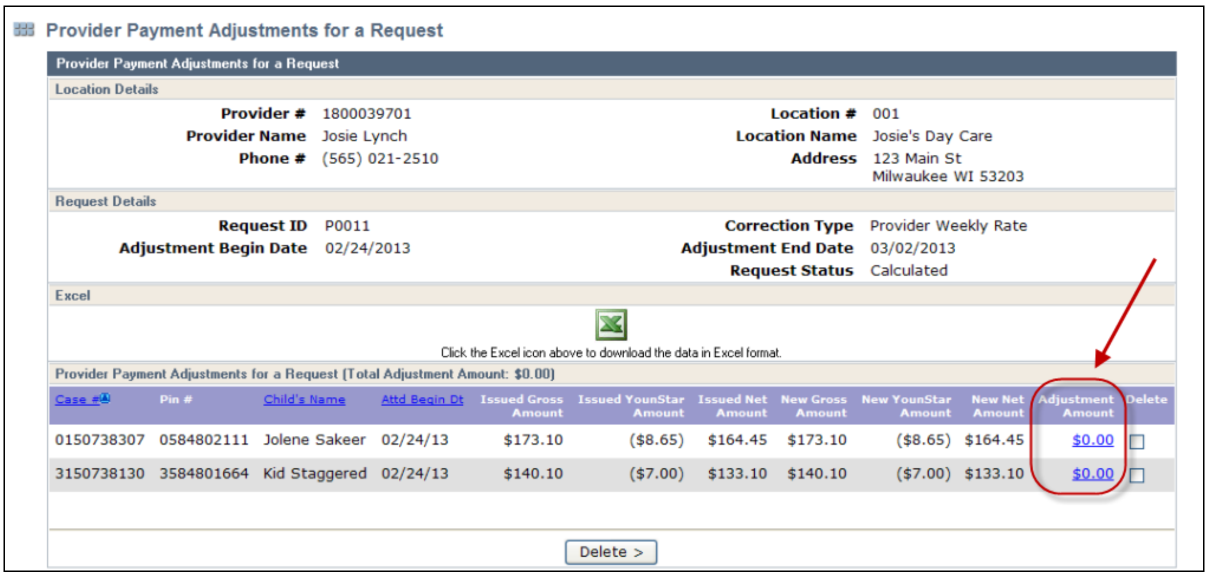
Adjustment Calculations

STEP 9 – View the Calculations.

1. Enter PIES the next day and select **Provider Payment Adjustment Requests**.
2. Search by Provider Number.
3. View the calculated adjustments by clicking on the Adjustment link.

*Refer to **The Next Day: What to Process Next** on page 42 for further details.

In the below example, the week of 2/24/13 no Adjustment Amounts were calculated since the provider's rate is higher than the county weekly ceiling maximum. Select Adjustment Amount for further details.


Provider Payment Adjustments for a Request

Provider Payment Adjustments for a Request

Location Details

Provider # 1800039701
Provider Name Josie Lynch
Phone # (565) 021-2510
Location # 001
Location Name Josie's Day Care
Address 123 Main St
Milwaukee WI 53203

Request Details

Request ID P0011
Adjustment Begin Date 02/24/2013
Correction Type Provider Weekly Rate
Adjustment End Date 03/02/2013
Request Status Calculated

Excel

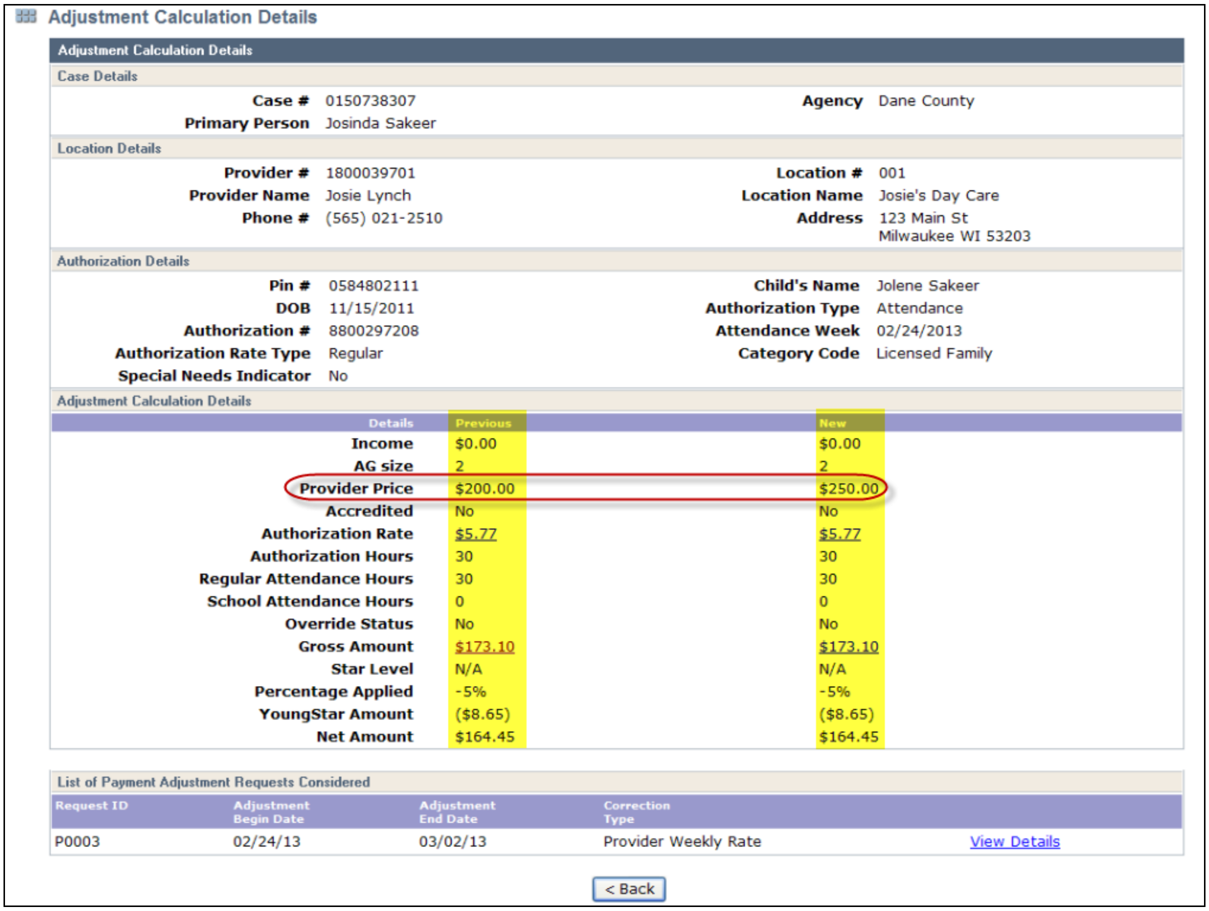
Click the Excel icon above to download the data in Excel format.

Provider Payment Adjustments for a Request (Total Adjustment Amount: $0.00)

Case #	Pin #	Child's Name	Attd Begin Dt	Issued Gross Amount	Issued YounStar Amount	Issued Net Amount	New Gross Amount	New YounStar Amount	New Net Amount	Adjustment Amount	Delete
0150738307	0584802111	Jolene Sakeer	02/24/13	$173.10	($8.65)	$164.45	$173.10	($8.65)	$164.45	$0.00	☐
3150738130	3584801664	Kid Staggered	02/24/13	$140.10	($7.00)	$133.10	$140.10	($7.00)	$133.10	$0.00	☐

Delete >

Compare the “Previous” and “New” calculations to see how the adjustment was calculated.



Adjustment Calculation Details

Adjustment Calculation Details

Case Details

Case #	0150738307	**Agency**	Dane County
Primary Person	Josinda Sakeer		

Location Details

Provider #	1800039701	**Location #**	001
Provider Name	Josie Lynch	**Location Name**	Josie's Day Care
Phone #	(565) 021-2510	**Address**	123 Main St Milwaukee WI 53203

Authorization Details

Pin #	0584802111	**Child's Name**	Jolene Sakeer
DOB	11/15/2011	**Authorization Type**	Attendance
Authorization #	8800297208	**Attendance Week**	02/24/2013
Authorization Rate Type	Regular	**Category Code**	Licensed Family
Special Needs Indicator	No		

Adjustment Calculation Details

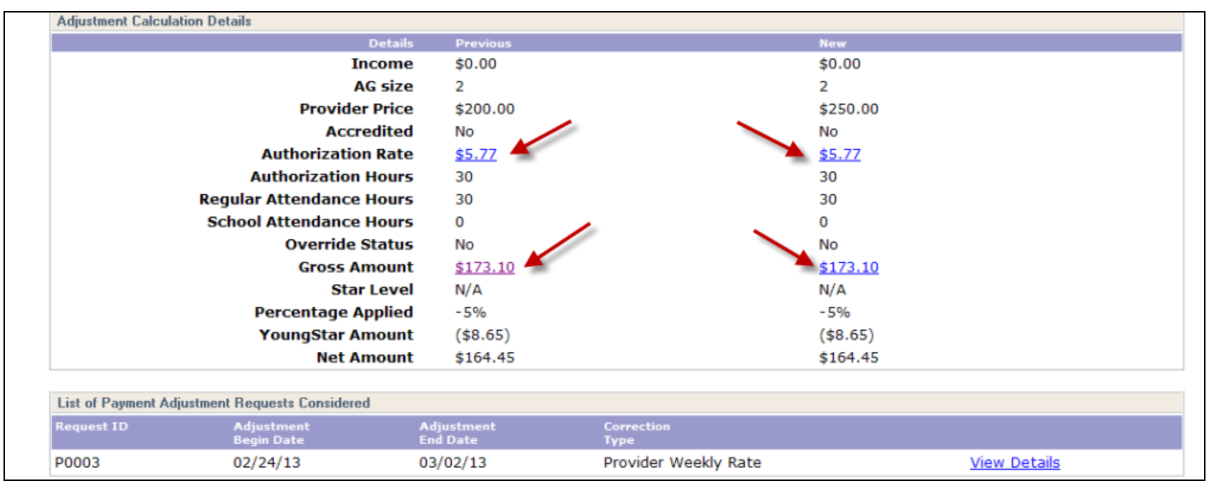
Details	Previous	New
Income	$0.00	$0.00
AG size	2	2
Provider Price	$200.00	$250.00
Accredited	No	No
Authorization Rate	$5.77	$5.77
Authorization Hours	30	30
Regular Attendance Hours	30	30
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$173.10	$173.10
Star Level	N/A	N/A
Percentage Applied	-5%	-5%
YoungStar Amount	($8.65)	($8.65)
Net Amount	$164.45	$164.45

List of Payment Adjustment Requests Considered

Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
P0003	02/24/13	03/02/13	Provider Weekly Rate	View Details

< Back

Details on the rate calculation can be viewed by clicking on the Authorization Rate and details on the issuance calculations can be viewed by clicking on the Gross Amount.



Adjustment Calculation Details

Details	Previous	New
Income	$0.00	$0.00
AG size	2	2
Provider Price	$200.00	$250.00
Accredited	No	No
Authorization Rate	$5.77	$5.77
Authorization Hours	30	30
Regular Attendance Hours	30	30
School Attendance Hours	0	0
Override Status	No	No
Gross Amount	$173.10	$173.10
Star Level	N/A	N/A
Percentage Applied	-5%	-5%
YoungStar Amount	($8.65)	($8.65)
Net Amount	$164.45	$164.45

List of Payment Adjustment Requests Considered

Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
P0003	02/24/13	03/02/13	Provider Weekly Rate	View Details

Provider Overpayment Due to Incorrect Category Details

1. Click on the **Provider Payment Requests** link underneath the PIES heading.
2. Search for a provider by using the Provider and Location number.
3. Select **New Provider Payment Adjustment Request** on the **List of Provider Payment Adjustment Requests**.

In the example below, provider was not licensed from 2/3/2013 to 2/19/2013, but the information was not received from licensing.

STEP 1 – Enter the following information on the **New Provider Payment Adjustment Request Screen**.

1. **Adjustment Time Frame**
   - Adjustment Begin Date is the Sunday of the first attendance week for which there was a possible incorrect issuance.
   - Adjustment End Date is the Saturday of the last attendance week for which there was a possible incorrect issuance.

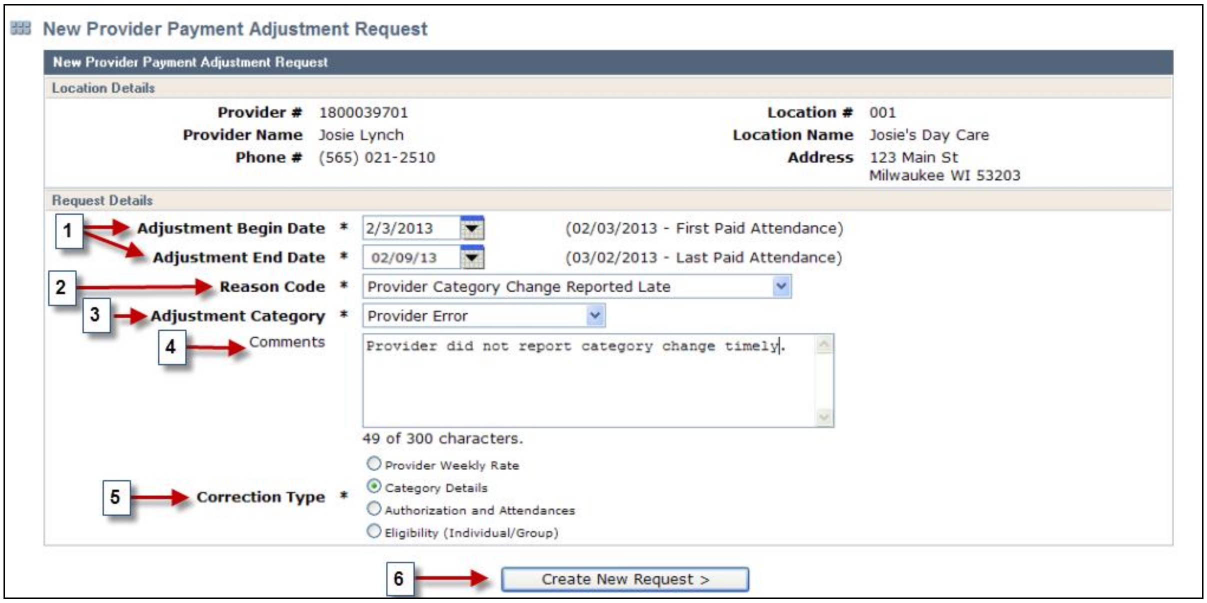
2. **End Code** – select the most accurate description from the drop down list as to the reason for which an incorrect issuance occurred.

3. **Adjustment Category** – indicates who is responsible for the overpayment and the rate of recoupment from the provider if they are active and still receiving Wisconsin Shares payments.
   - Agency Error
   - Provider Error
   - Intentional Program Violation

4. **Comments –** briefly explain the nature of the overpayment. If there are multiple children in a case, enter the child's name in the comments.

5. **Correction Type –** indicates the type of error that occurred. In this example it is **Category Details**.

6. **Select** Create New Request.


New Provider Payment Adjustment Request

New Provider Payment Adjustment Request

Location Details

Provider #	1800039701	Location #	001
Provider Name	Josie Lynch	Location Name	Josie's Day Care
Phone #	(565) 021-2510	Address	123 Main St Milwaukee WI 53203

Request Details

1 Adjustment Begin Date * 2/3/2013 (02/03/2013 - First Paid Attendance)

Adjustment End Date * 02/09/13 (03/02/2013 - Last Paid Attendance)

2 Reason Code * Provider Category Change Reported Late

3 Adjustment Category * Provider Error

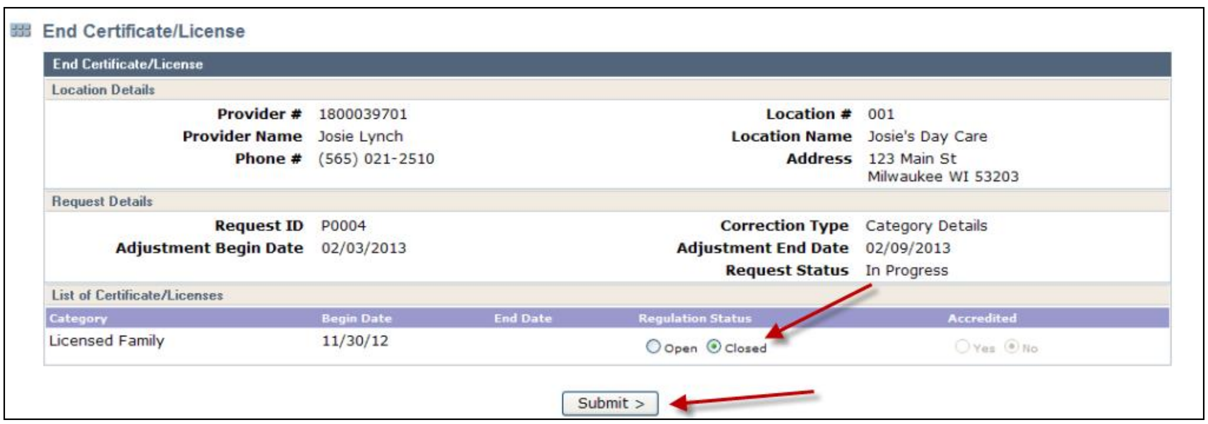
4 Comments Provider did not report category change timely.

49 of 300 characters.

5 Correction Type * Provider Weekly Rate / Category Details / Authorization and Attendances / Eligibility (Individual/Group)

6 Create New Request >

STEP 2 – Change the Regulation Status on the End Certification/License page to Closed to indicate that there was no active license at that time and then click Submit.


End Certificate/License

End Certificate/License

Location Details

Provider #	1800039701	Location #	001
Provider Name	Josie Lynch	Location Name	Josie's Day Care
Phone #	(565) 021-2510	Address	123 Main St Milwaukee WI 53203

Request Details

Request ID	P0004	Correction Type	Category Details
Adjustment Begin Date	02/03/2013	Adjustment End Date	02/09/2013
		Request Status	In Progress

List of Certificate/Licenses

Category	Begin Date	End Date	Regulation Status	Accredited
Licensed Family	11/30/12		Open / Closed	Yes / No

Submit >

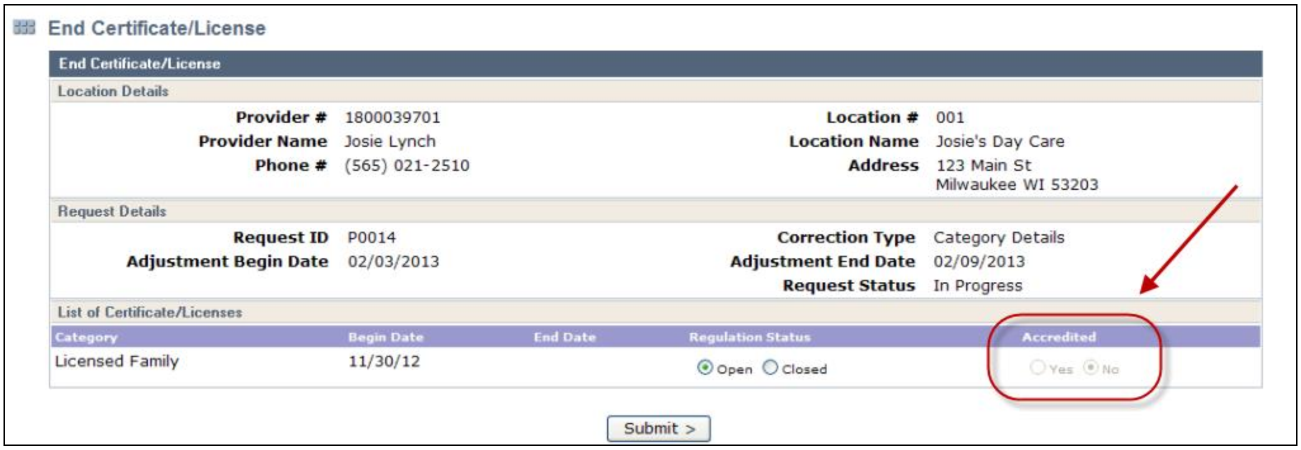
Complete Request

STEP 3 – Change the Request Status from In Progress to Completed by clicking on the Edit Icon.

*Review **"Mark as Completed and Prep for Overnight Processing"** steps on page 41 for further details.

STEP 4 – The completed request will process overnight.

NOTE
The accreditation adjustment functionality can only be used for calculating an adjustment for an accredited child care facility prior to 7/1/2012. The functionality to switch the accreditation to No exists; however, PIES will not calculate an adjustment due to a change in accreditation status after 7/1/2012 due to YoungStar. The option will still be available in Category Details; however, changing the status will create no adjustments.



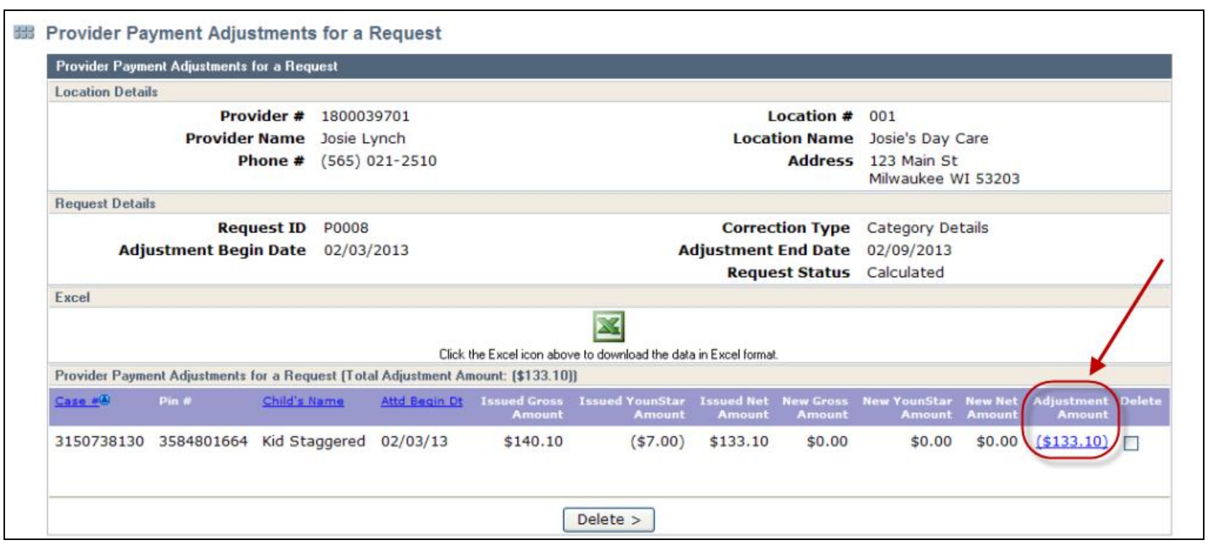
<u>**The Next day: What to Process**</u>

Adjustment Calculations

<u>**STEP 5**</u> – View the Calculations.

1. Enter PIES the next day and select **Provider Payment Adjustment Requests**
2. Search by Provider Number.
3. View the calculated adjustments by clicking on the Adjustment link.

*Refer to **The Next Day: What to Process Next** one page 42 for further details.

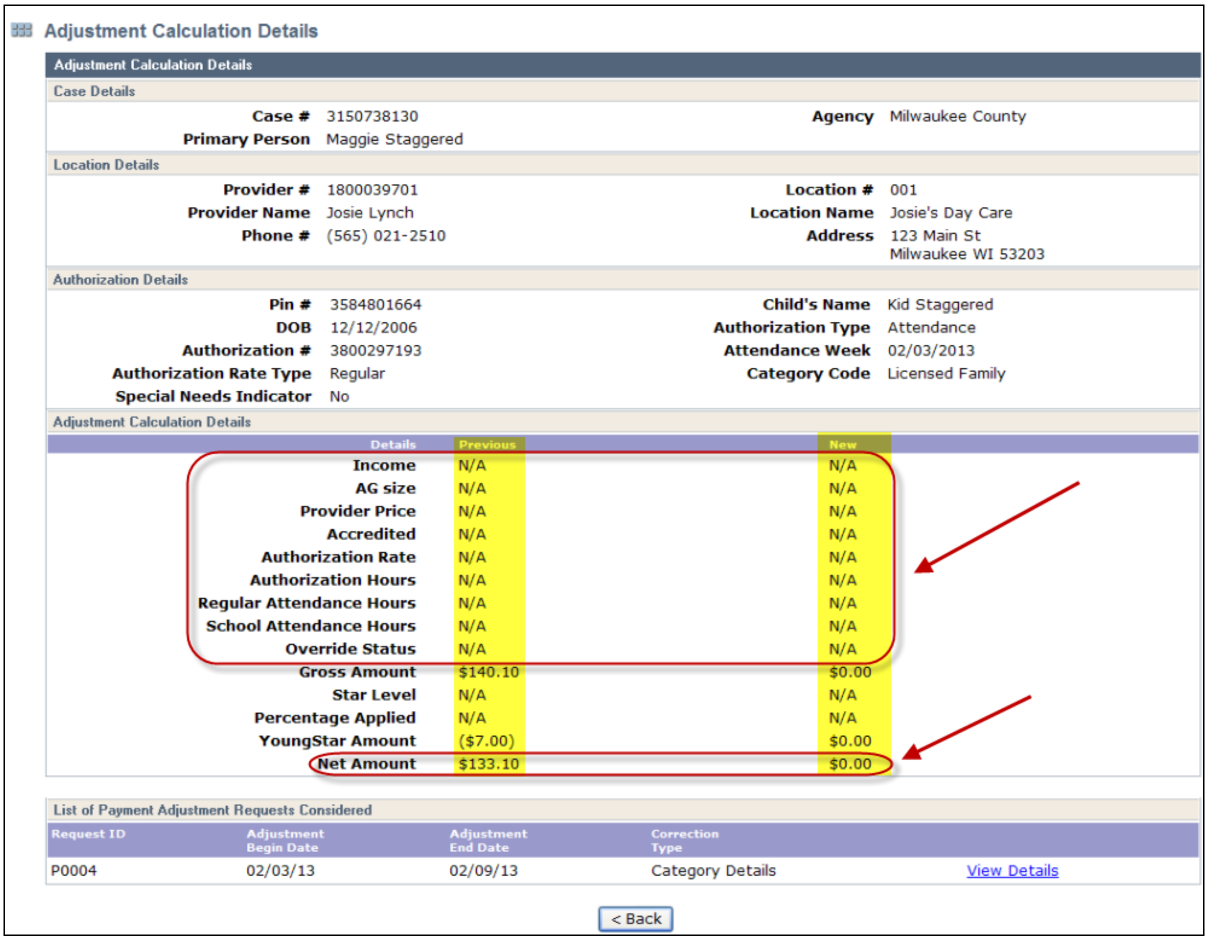


If the Adjustment Amount is in parentheses, you will enter a negative adjustment into CSAW. If the amount is not in parentheses, you will enter a positive adjustment into CSAW.

The example above shows that for the week of 2/3/13, a negative adjustment of $133.10 should be entered for the child.

The **Adjustment Calculation Details** page shows the changes made to the category details that resulted in a decrease in the payment.

In the below example, since the provider was not licensed, all the information is considered non-applicable (N/A) and a full overpayment was calculated.



Adjustment Calculation Details

Adjustment Calculation Details

Case Details

Case #	3150738130	**Agency**	Milwaukee County
Primary Person	Maggie Staggered		

Location Details

Provider #	1800039701	**Location #**	001
Provider Name	Josie Lynch	**Location Name**	Josie's Day Care
Phone #	(565) 021-2510	**Address**	123 Main St Milwaukee WI 53203

Authorization Details

Pin #	3584801664	**Child's Name**	Kid Staggered
DOB	12/12/2006	**Authorization Type**	Attendance
Authorization #	3800297193	**Attendance Week**	02/03/2013
Authorization Rate Type	Regular	**Category Code**	Licensed Family
Special Needs Indicator	No		

Adjustment Calculation Details

Details	Previous	New
Income	N/A	N/A
AG size	N/A	N/A
Provider Price	N/A	N/A
Accredited	N/A	N/A
Authorization Rate	N/A	N/A
Authorization Hours	N/A	N/A
Regular Attendance Hours	N/A	N/A
School Attendance Hours	N/A	N/A
Override Status	N/A	N/A
Gross Amount	$140.10	$0.00
Star Level	N/A	N/A
Percentage Applied	N/A	N/A
YoungStar Amount	($7.00)	$0.00
Net Amount	$133.10	$0.00

List of Payment Adjustment Requests Considered

Request ID	Adjustment Begin Date	Adjustment End Date	Correction Type	
P0004	02/03/13	02/09/13	Category Details	View Details

< Back

Provider Overpayment Due to Incorrect Eligibility

1. Click on the **Provider Payment Request Link** underneath the PIES heading.
2. Search for a provider by using the Provider and Location number.
3. Select **New Provider Payment Adjustment Request** on the **List of Provider Payment Adjustment Requests**.

This adjustment type can be used when the provider entered inaccurate hours and received payment for the child(ren). Instead of marking each individual week of attendance as zero, the worker can use a checkbox to indicate that no payment should have been made for the child(ren) for the entire adjustment period.

If it is suspected that the provider entered inaccurate attendance for children intentionally, then the provider should be audited. Please contact the Fraud Detection and Investigation Unit (FDIU) for any investigation or technical assistance with auditing.

STEP 1 – Enter the following information on the **New Provider Payment Adjustment Request Screen**.

1. **Adjustment Time Frame**
   - Adjustment Begin Date is the Sunday of the first attendance week for which there was a possible incorrect issuance.
   - Adjustment End Date is the Saturday of the last attendance week for which there was a possible incorrect issuance.

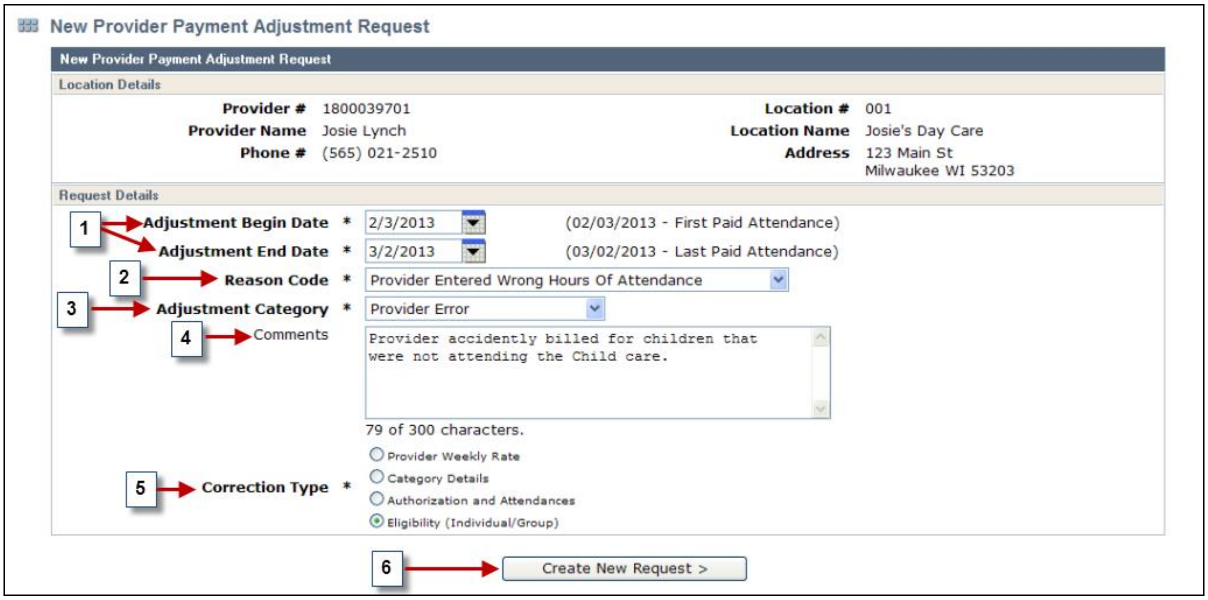
2. **Reason Code** – select the most accurate description from the drop down list as to the reason for which an incorrect issuance occurred.

3. **Adjustment Category** – indicates who is responsible for the overpayment and the rate of recoupment from the provider if they are active and still receiving Wisconsin Shares payments.
   - Agency Error
   - Provider Error
   - Intentional Program Violation

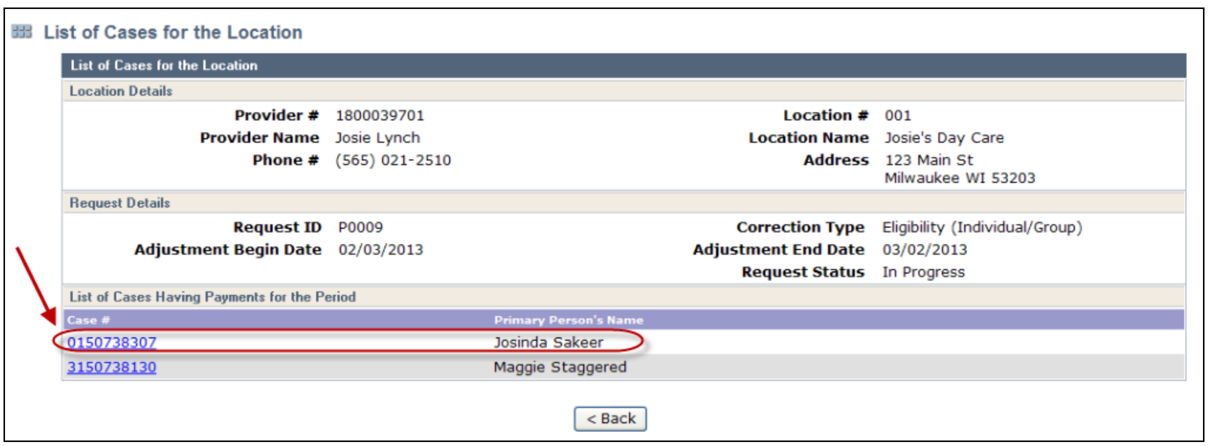
4. **Comments –** briefly explain the nature of the overpayment. If there are multiple children in a case, enter the child's name in the comments.

5. **Correction Type –** indicates the type of error that occurred. In this example it is **Eligibility (Individual/Group).**

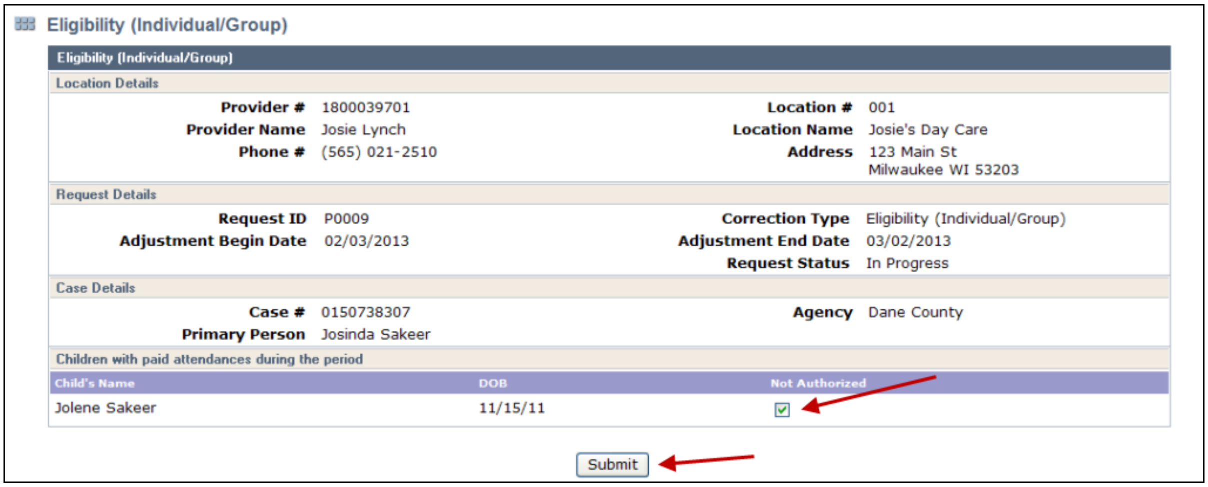
6. **Select** Create New Request.



STEP 2 – The **List of Cases for the Location** page list all the cases during the payment adjustment request period where subsidized payment had been made to the provider. Select the case where there should not have been an authorization.

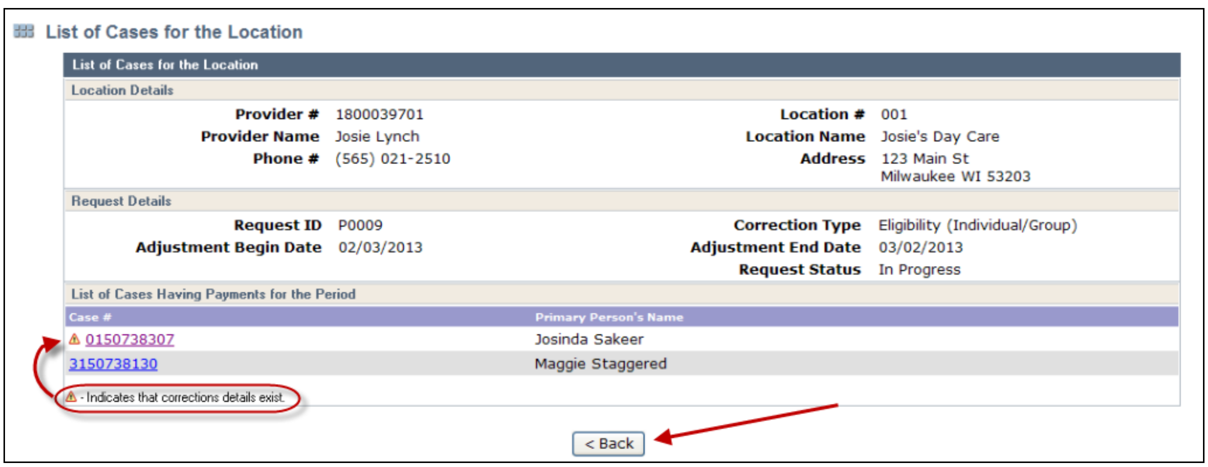


<u>STEP 3</u> – On the **Eligibility (Individual/Group)** page, check a box for the children who should not have been authorized during this period and select Submit.



STEP 4 – Select any other cases, if applicable, where there should not have been an authorization and repeat the process. In this example, there is only one authorization for the provider that is not eligible. When all the changes have been made, the work will select Back.

The informational symbol next to the child's name indicates that the adjustment request includes a correction for this case.



Complete Request

<u>STEP 5</u> – Change the Request Status from "In Progress" to "Completed" by clicking on the Edit Icon.

*Review **"Mark as Completed and Prep for Overnight Processing"** steps on page 41 for further details.

<u>STEP 6</u> – The completed request will process overnight.

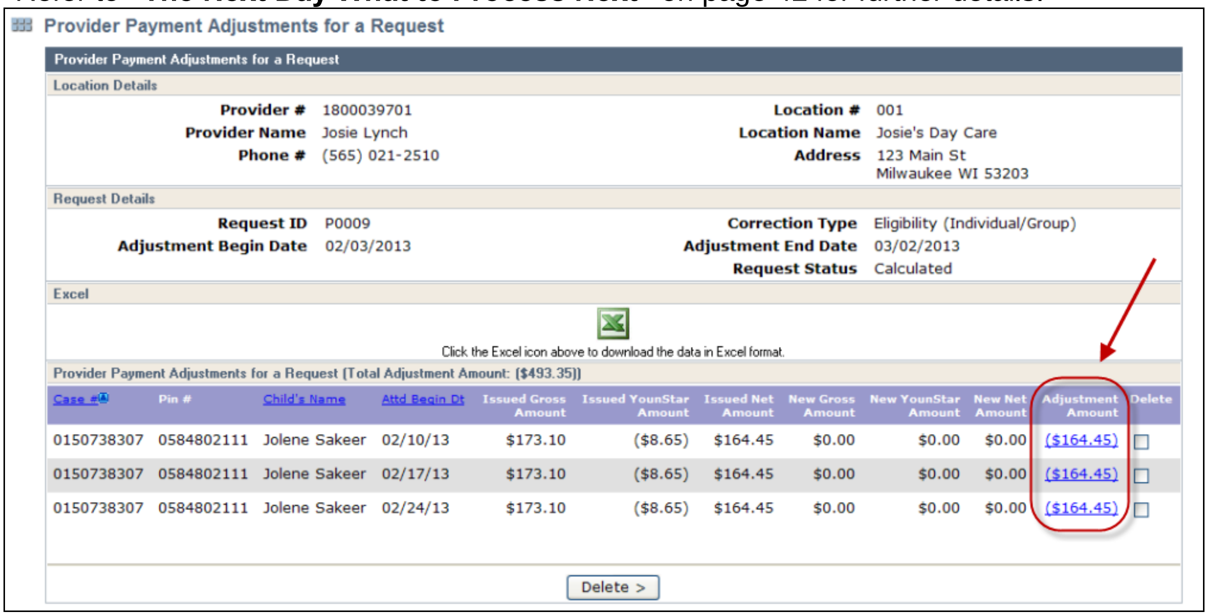
The Next Day: What to Process Next

Adjustment Calculations

STEP 7 – View the Calculations.

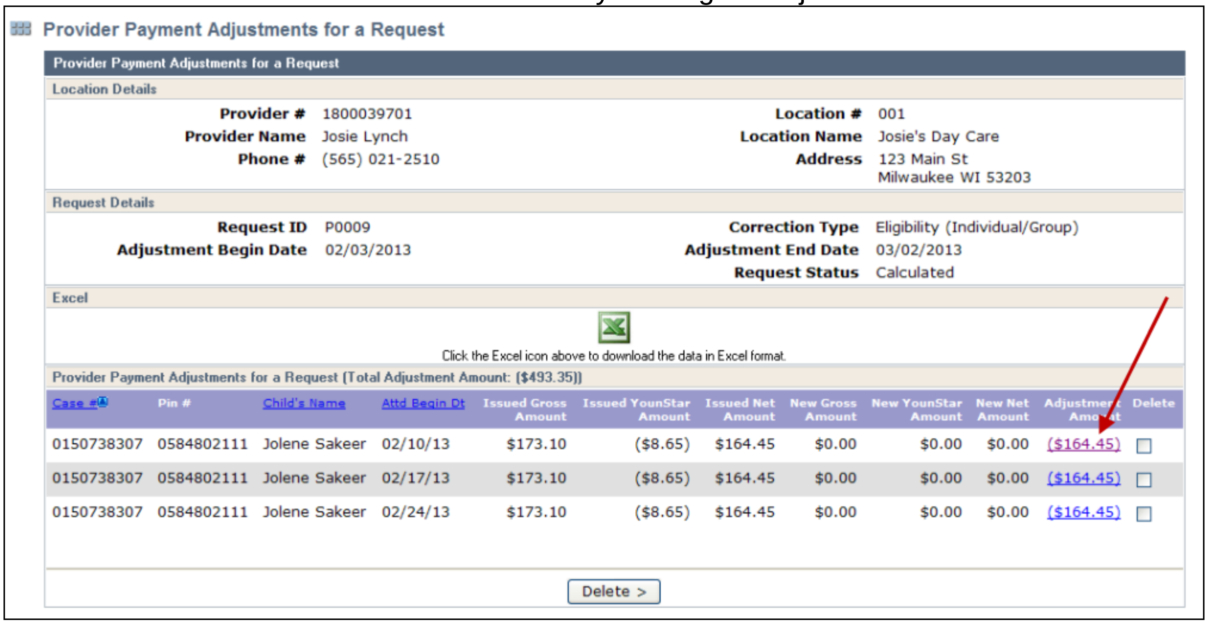
1. Enter PIES the next day and select **Provider Payment Adjustment Requests**.
2. Search by Provider Number.
3. View the calculated adjustments by clicking on the Adjustment link.

*Refer to **"The Next Day What to Process Next"** on page 42 for further details.



If the Adjustment Amount is in parentheses, you will enter a negative adjustment into CSAW. If the amount is not in parentheses, you will enter a positive adjustment into CSAW.

The details of the calculation can be viewed by clicking on Adjustment Amount.



Provider Payment Adjustments for a Request

Provider Payment Adjustments for a Request

Location Details

Provider #	1800039701	Location #	001
Provider Name	Josie Lynch	Location Name	Josie's Day Care
Phone #	(565) 021-2510	Address	123 Main St Milwaukee WI 53203

Request Details

Request ID	P0009	Correction Type	Eligibility (Individual/Group)
Adjustment Begin Date	02/03/2013	Adjustment End Date	03/02/2013
		Request Status	Calculated

Excel

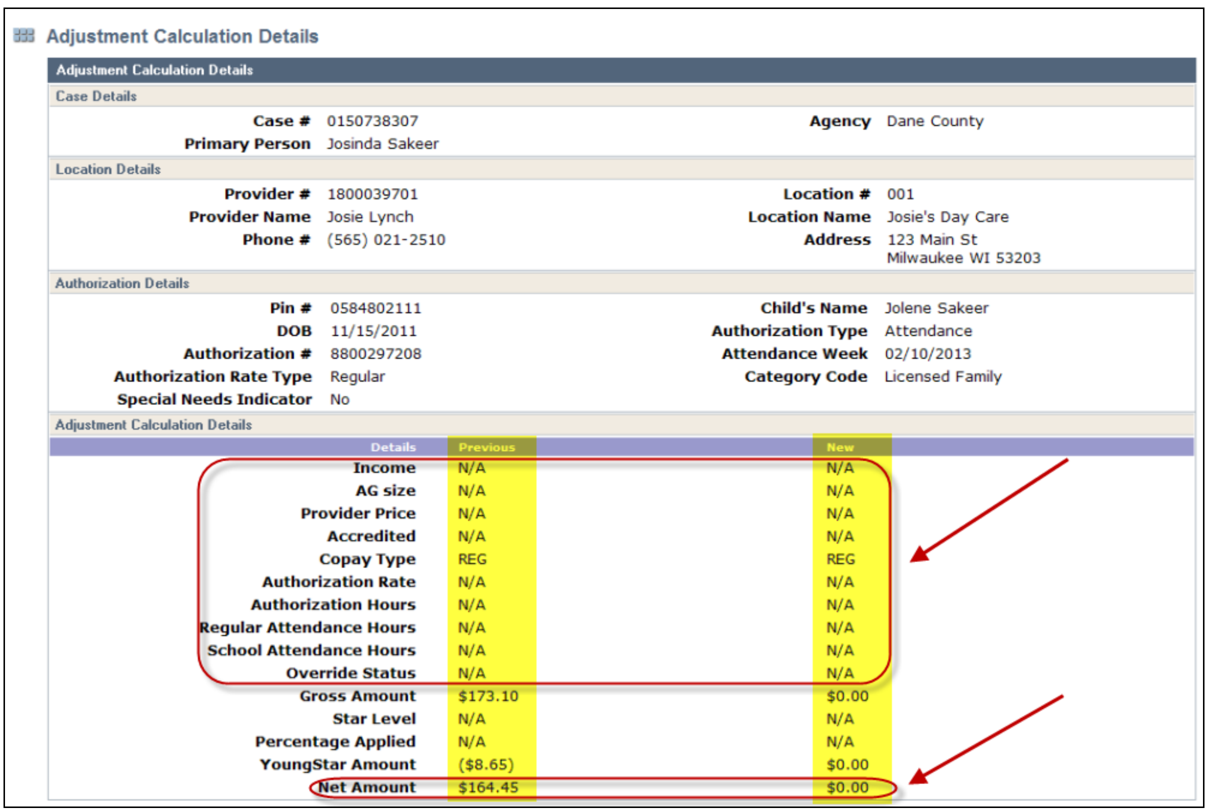
Click the Excel icon above to download the data in Excel format.

Provider Payment Adjustments for a Request [Total Adjustment Amount: ($493.35)]

Case #	Pin #	Child's Name	Attd Begin Dt	Issued Gross Amount	Issued YounStar Amount	Issued Net Amount	New Gross Amount	New YounStar Amount	New Net Amount	Adjustment Amount	Delete
0150738307	0584802111	Jolene Sakeer	02/10/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☐
0150738307	0584802111	Jolene Sakeer	02/17/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☐
0150738307	0584802111	Jolene Sakeer	02/24/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☐

Delete >

The **Adjustment Calculation Details** page shows the changes made to the category details that resulted in a decrease in the payment.



Adjustment Calculation Details

Adjustment Calculation Details

Case Details

Case #	0150738307	Agency	Dane County
Primary Person	Josinda Sakeer		

Location Details

Provider #	1800039701	Location #	001
Provider Name	Josie Lynch	Location Name	Josie's Day Care
Phone #	(565) 021-2510	Address	123 Main St Milwaukee WI 53203

Authorization Details

Pin #	0584802111	Child's Name	Jolene Sakeer
DOB	11/15/2011	Authorization Type	Attendance
Authorization #	8800297208	Attendance Week	02/10/2013
Authorization Rate Type	Regular	Category Code	Licensed Family
Special Needs Indicator	No		

Adjustment Calculation Details

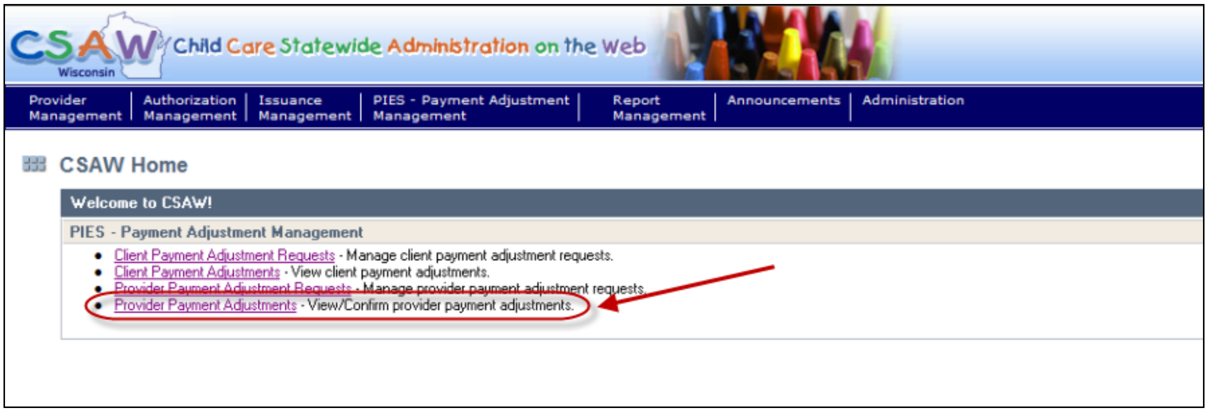
Details	Previous	New
Income	N/A	N/A
AG size	N/A	N/A
Provider Price	N/A	N/A
Accredited	N/A	N/A
Copay Type	REG	REG
Authorization Rate	N/A	N/A
Authorization Hours	N/A	N/A
Regular Attendance Hours	N/A	N/A
School Attendance Hours	N/A	N/A
Override Status	N/A	N/A
Gross Amount	$173.10	$0.00
Star Level	N/A	N/A
Percentage Applied	N/A	N/A
YoungStar Amount	($8.65)	$0.00
Net Amount	$164.45	$0.00

Since the child was not eligible, all the information is considered non-applicable (N/A) and a full overpayment was calculated.

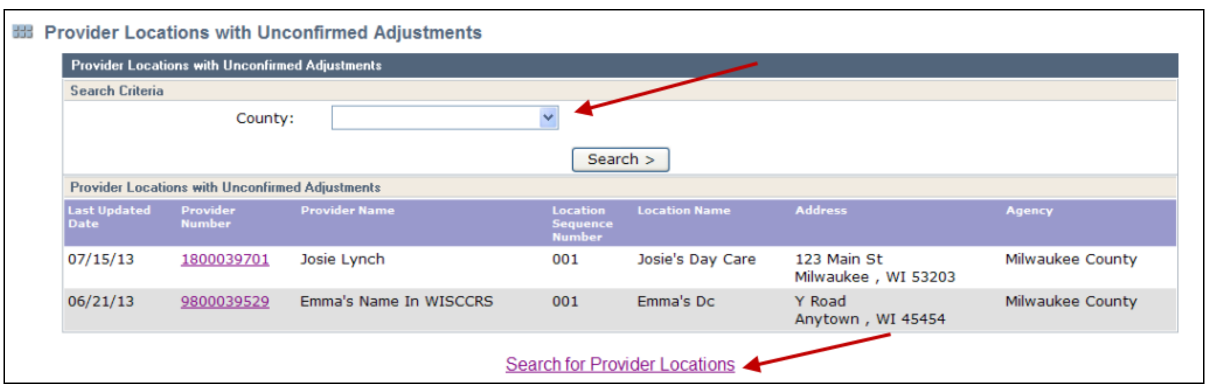
Confirming Provider Adjustment Calculations

After PIES calculates the Provider Adjustment, they can be confirmed and the system will automatically process the adjustments overnight. This eliminates the manual data entry of adjustments in the Payment Adjustment Screen.

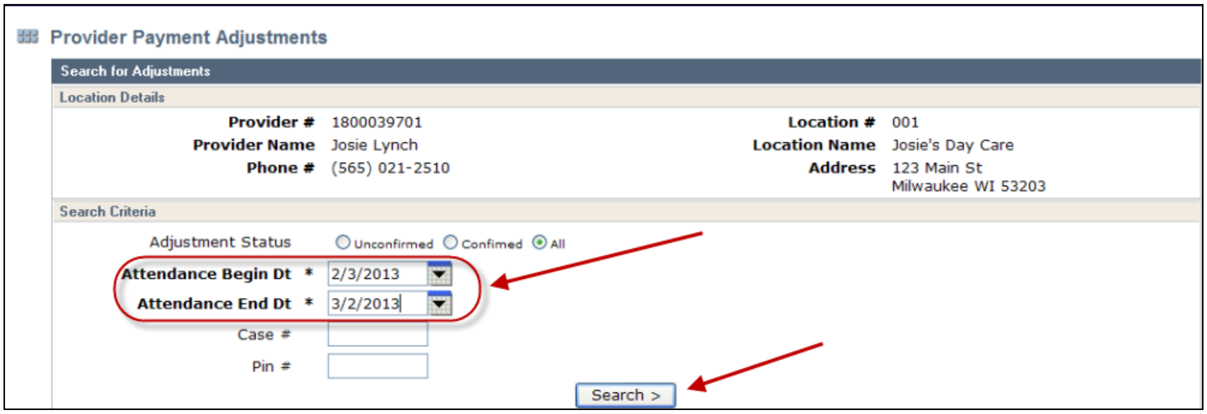
To confirm your adjustments, select **Provider Payment Adjustments**.



Some **Provider Locations with Unconfirmed Adjustments** may automatically appear; however, if they do not you can search for your adjustments by County from the drop down menu or by the Search for Provider Locations link.



Select the provider and enter the dates of your calculated overpayment then select Search.


Provider Payment Adjustments

Search for Adjustments

Location Details

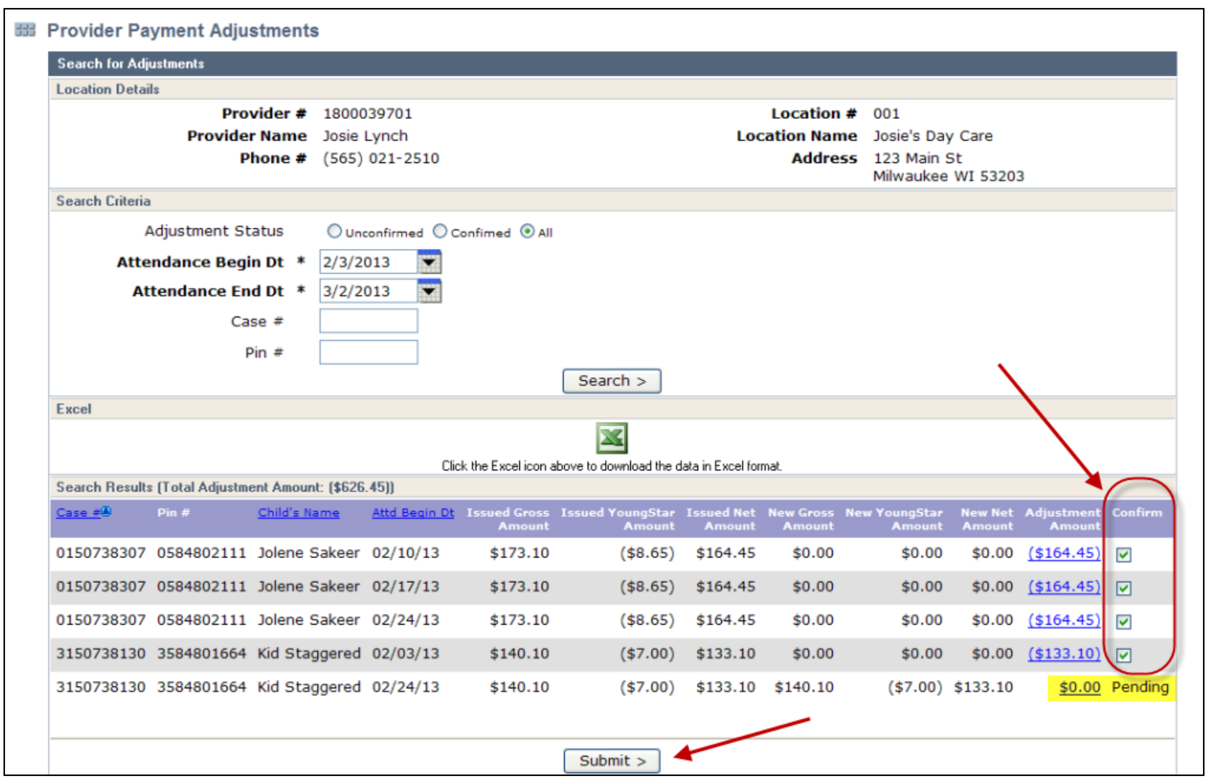
Provider # 1800039701
Provider Name Josie Lynch
Phone # (565) 021-2510
Location # 001
Location Name Josie's Day Care
Address 123 Main St
Milwaukee WI 53203

Search Criteria

Adjustment Status ○ Unconfirmed ○ Confirmed ⦿ All
Attendance Begin Dt * 2/3/2013
Attendance End Dt * 3/2/2013
Case #
Pin #
Search >

This will show all the **Provider Payment Adjustments** that were calculated during that timeframe.

Confirm individual adjustments applicable to your request by checking the box in the Confirm column and select Submit.


Provider Payment Adjustments

Search for Adjustments

Location Details

Provider # 1800039701
Provider Name Josie Lynch
Phone # (565) 021-2510
Location # 001
Location Name Josie's Day Care
Address 123 Main St
Milwaukee WI 53203

Search Criteria

Adjustment Status ○ Unconfirmed ○ Confirmed ⦿ All
Attendance Begin Dt * 2/3/2013
Attendance End Dt * 3/2/2013
Case #
Pin #
Search >

Excel

Click the Excel icon above to download the data in Excel format.

Search Results (Total Adjustment Amount: ($626.45))

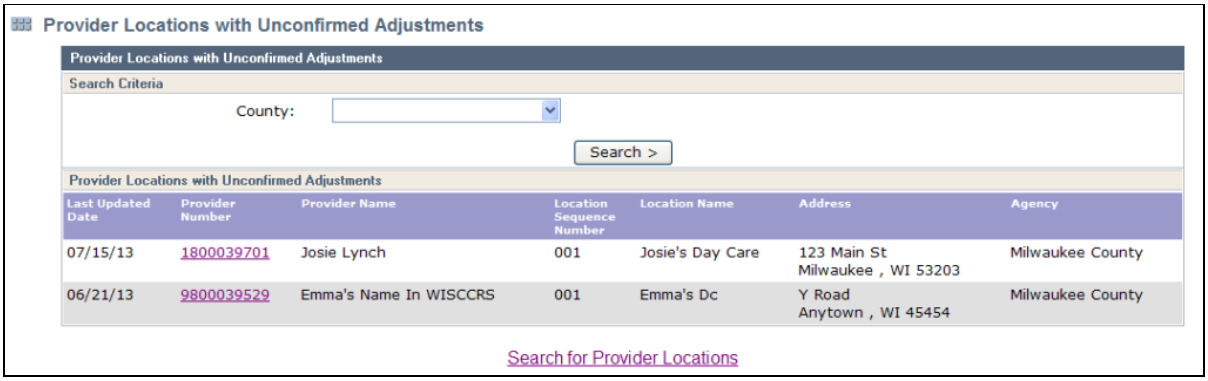
Case #	Pin #	Child's Name	Attd Begin Dt	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Confirm
0150738307	0584802111	Jolene Sakeer	02/10/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☑
0150738307	0584802111	Jolene Sakeer	02/17/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☑
0150738307	0584802111	Jolene Sakeer	02/24/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☑
3150738130	3584801664	Kid Staggered	02/03/13	$140.10	($7.00)	$133.10	$0.00	$0.00	$0.00	($133.10)	☑
3150738130	3584801664	Kid Staggered	02/24/13	$140.10	($7.00)	$133.10	$140.10	($7.00)	$133.10	$0.00	Pending

Submit >

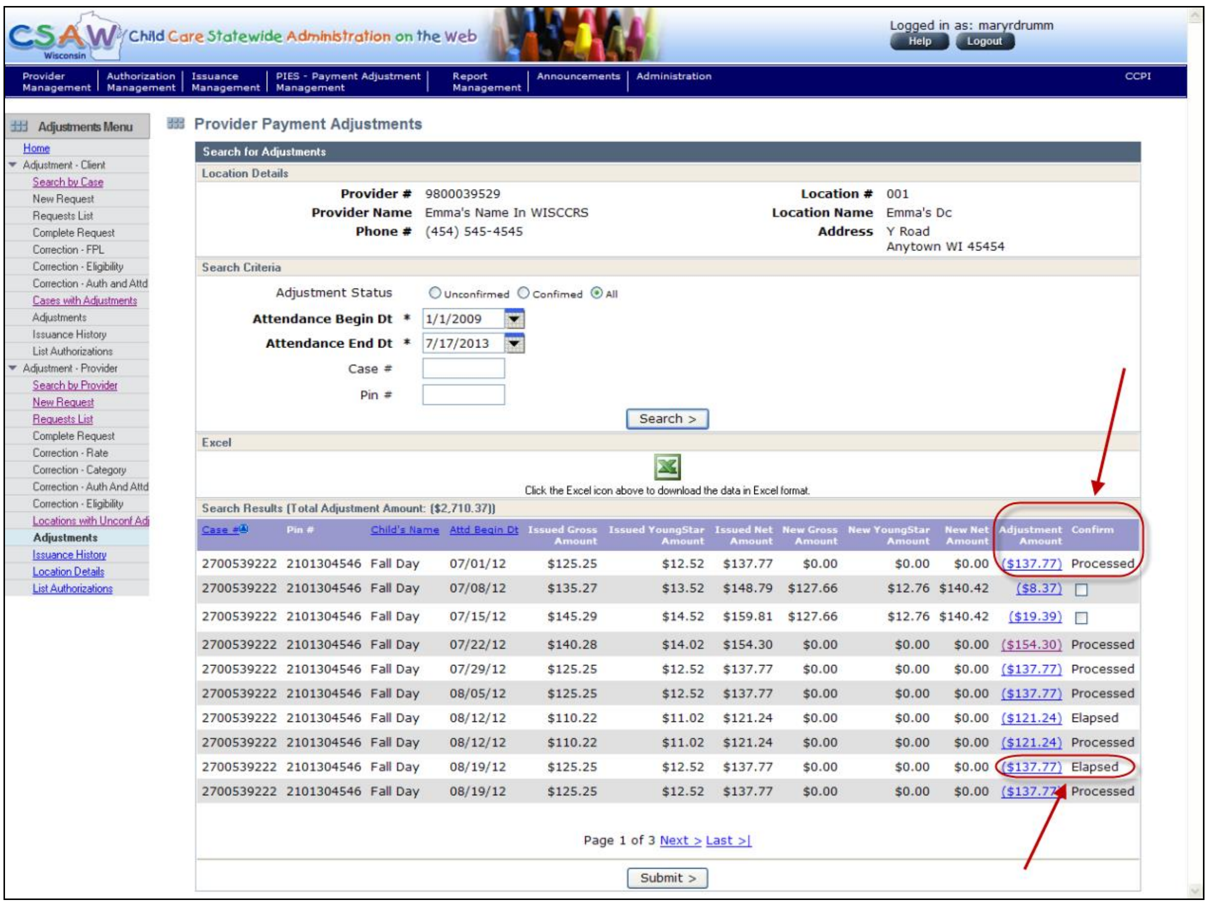
If you have confirmed adjustments Monday-Thursday, they can be unconfirmed by the end of the following day by removing the check mark and selecting Submit. If you have confirmed the adjustments on a Friday, they can be unconfirmed by the end of the following Monday.

Adjustments shown as **Pending** are adjustments with $0.00 amounts that will not need to be confirmed.

Once successfully submitted, the system will bring you to the **Provider Locations with Unconfirmed Adjustments** screen.



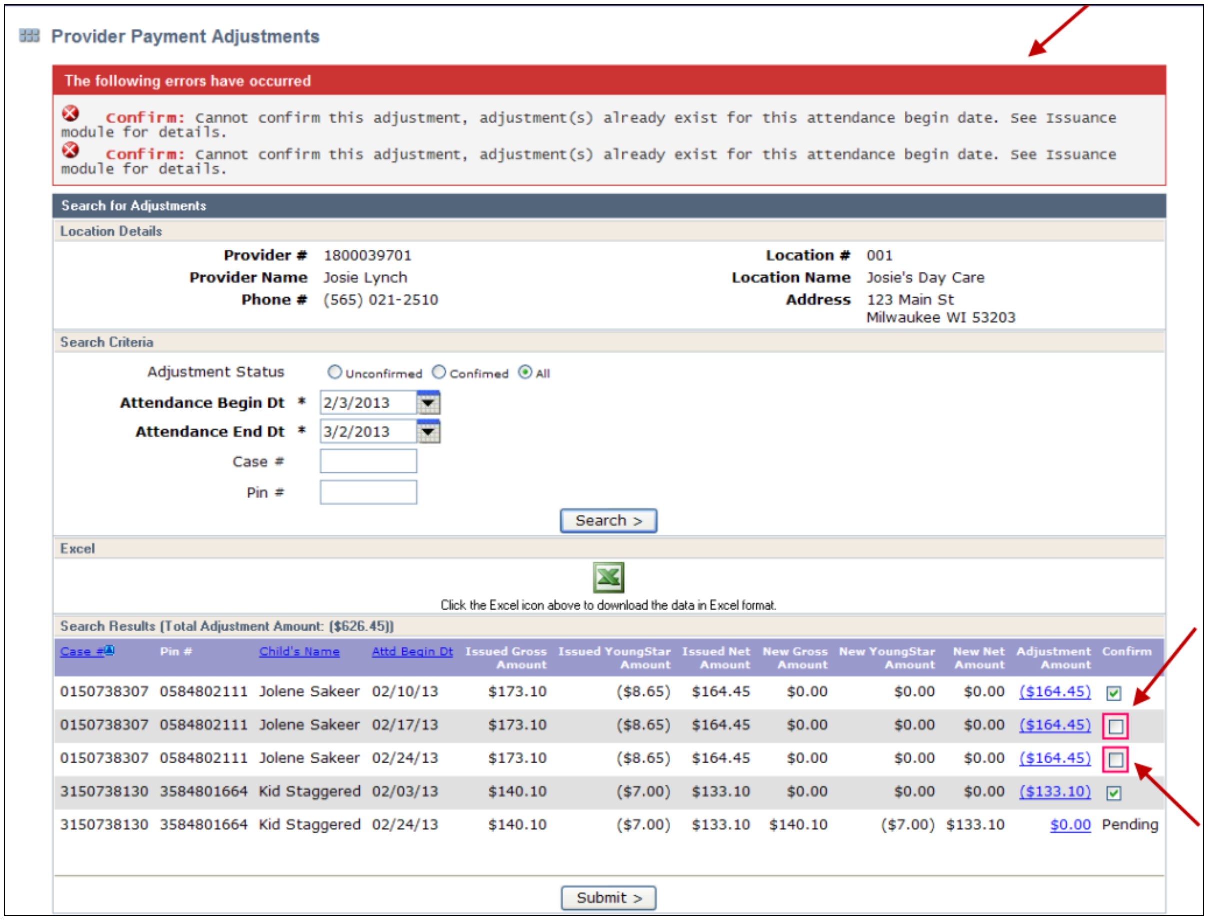
Choose the Provider Number for which you want to view the calculated adjustments. When processed, the Adjustment Amount will show as **Processed** in the Confirm column.



Any adjustment amount shown as **Elapsed** is either from calculations done prior to July 28, 2013 or from calculations deleted in PIES. Elapsed adjustments cannot be confirmed and if applicable need to be entered manually.

The system will only allow **Provider Payment Adjustments** calculated in PIES to be confirmed once. PIES will always allow adjustments to be calculated for any time frame for any scenario as long as the provider has billed and issuances have been sent; however, if there has already been a confirmed adjustment for a time period, the new adjustment must be entered manually into the Provider Payment Adjustment Screen.

The system will notify when this has occurred by the following error message shown in the screen shot below.


Provider Payment Adjustments

The following errors have occurred

confirm: Cannot confirm this adjustment, adjustment(s) already exist for this attendance begin date. See Issuance module for details.

confirm: Cannot confirm this adjustment, adjustment(s) already exist for this attendance begin date. See Issuance module for details.

Search for Adjustments

Location Details

Provider # 1800039701
Provider Name Josie Lynch
Phone # (565) 021-2510
Location # 001
Location Name Josie's Day Care
Address 123 Main St
Milwaukee WI 53203

Search Criteria

Adjustment Status: Unconfirmed / Confirmed / All
Attendance Begin Dt * 2/3/2013
Attendance End Dt * 3/2/2013
Case #
Pin #

Search >

Excel

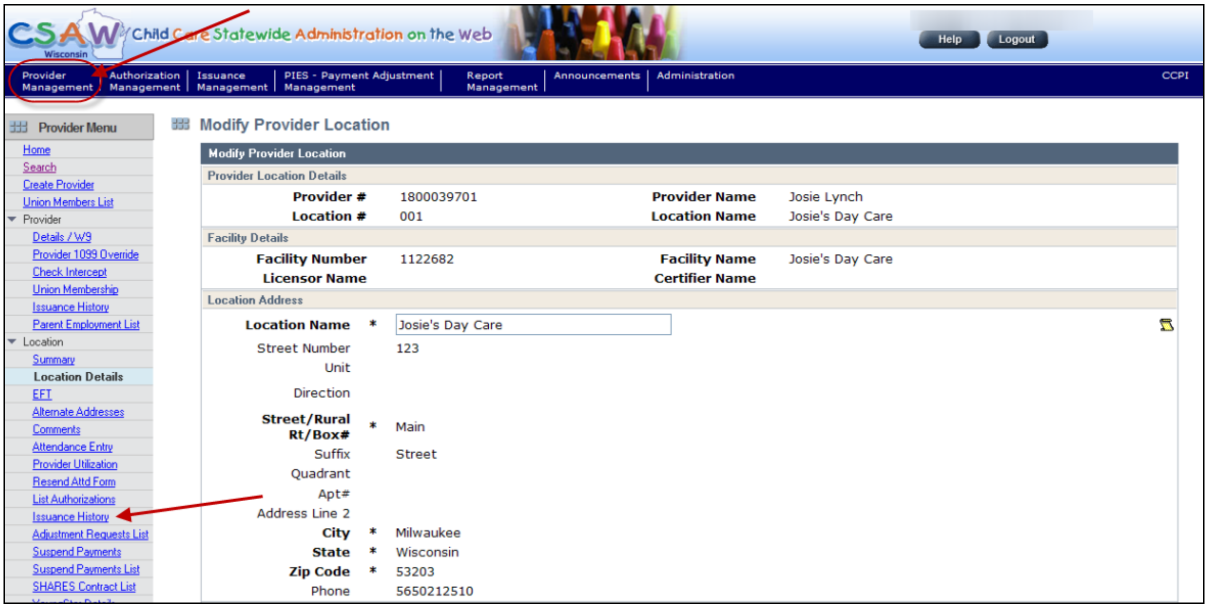
Click the Excel icon above to download the data in Excel format.

Search Results (Total Adjustment Amount: ($626.45))

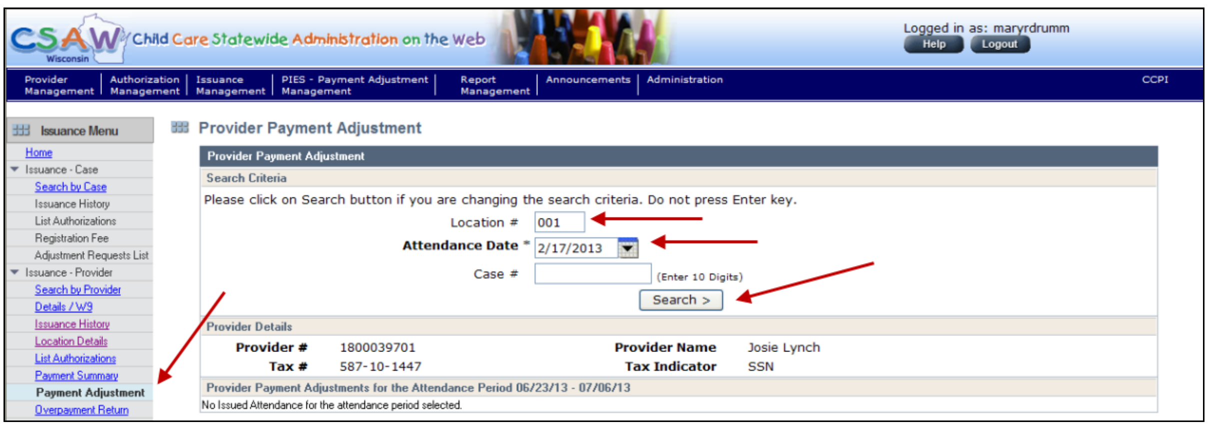
Case #	Pin #	Child's Name	Attd Begin Dt	Issued Gross Amount	Issued YoungStar Amount	Issued Net Amount	New Gross Amount	New YoungStar Amount	New Net Amount	Adjustment Amount	Confirm
0150738307	0584802111	Jolene Sakeer	02/10/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☑
0150738307	0584802111	Jolene Sakeer	02/17/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☐
0150738307	0584802111	Jolene Sakeer	02/24/13	$173.10	($8.65)	$164.45	$0.00	$0.00	$0.00	($164.45)	☐
3150738130	3584801664	Kid Staggered	02/03/13	$140.10	($7.00)	$133.10	$0.00	$0.00	$0.00	($133.10)	☑
3150738130	3584801664	Kid Staggered	02/24/13	$140.10	($7.00)	$133.10	$140.10	($7.00)	$133.10	$0.00	Pending

Submit >

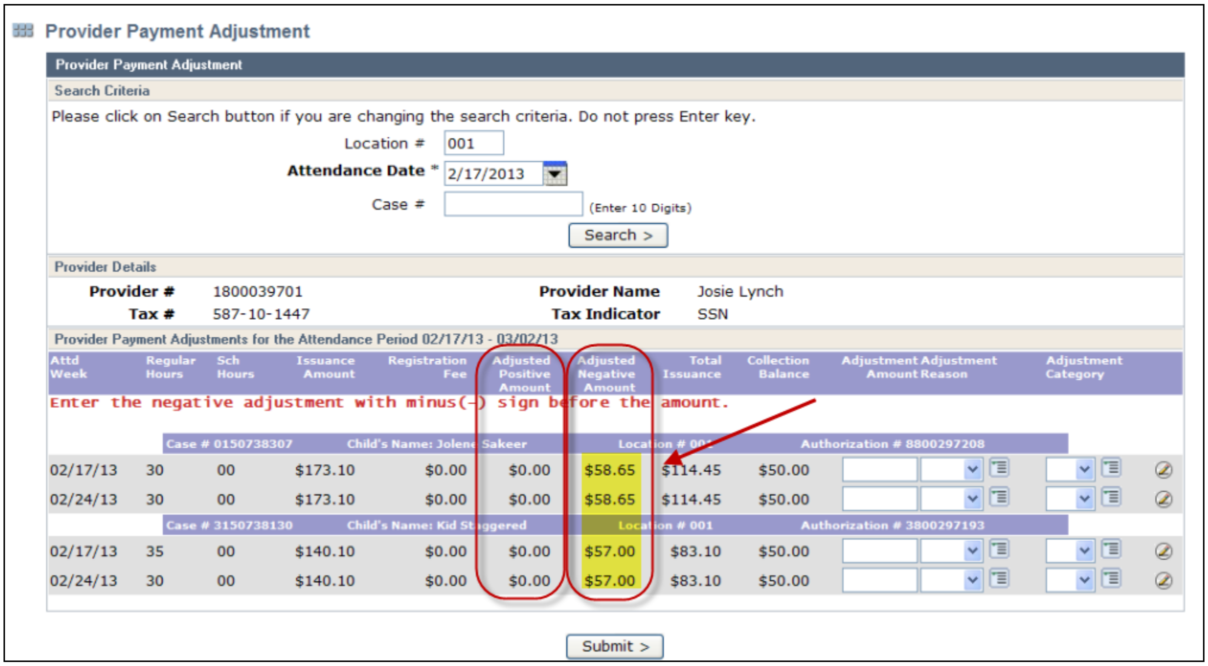
Confirmed adjustments can also be viewed by entering Provider Management, searching by Provider and Location Number, and then selecting Issuance History in the Provider Menu.



Select **Provider Payment Adjustment**, enter Location #, Attendance Date and select Search.



Positive and Negative Adjustments will show in the columns circled below. In the screen shot below, you can see in the highlighted area that Adjusted Negative Amounts were confirmed or manually entered.



The following day the negative adjustments that were confirmed will appear on the Return and Recovery screen, in addition to any negative adjustments that were already entered. Unless the adjustments are confirmed on a Friday, then the system will process the adjustments on Monday and can be viewed on Tuesday.

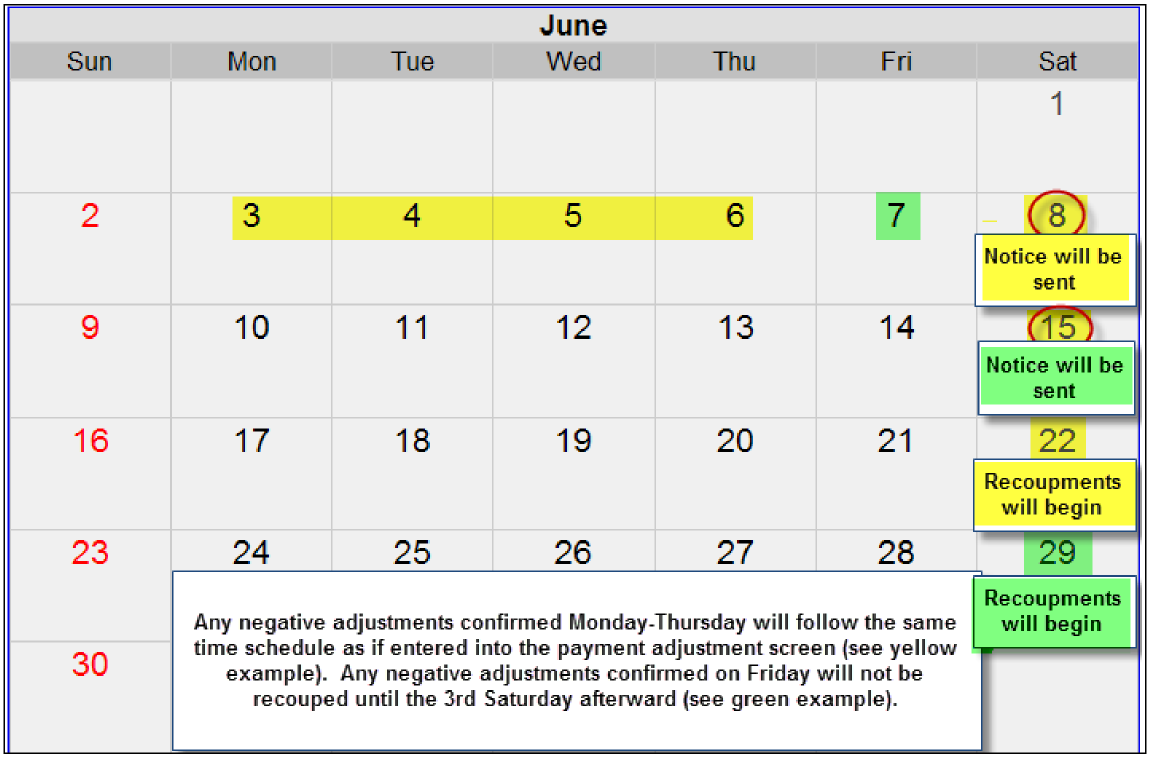
Positive adjustments will not appear in the Return and Recovery screen.

Recoupment of Negative adjustments

The start of the recoupment process for a negative adjustment is different depending on whether the adjustment is entered in CSAW manually or confirmed in PIES and whether the provider consistently bills on a biweekly basis.

- **Manual adjustments.** A negative adjustment is entered on the Payment Adjustment Screen on Monday – Saturday. The adjustment notice will be generated that Saturday and the recoupment process will begin on a Saturday two weeks later. The recoupment will come out of the provider issuance at the percentage determined by the Adjustment Category (AE=10%, PE=25% and IV=50%).
- **Confirmed in PIES.** A negative adjustment is confirmed in PIES Monday – Thursday. The adjustment notice will be generated Saturday of that week and the recoupment process will begin on a Saturday two weeks later. If a negative adjustment is confirmed on Friday, the adjustment notice will be generated the following Saturday and the recoupment process will begin on a Saturday two weeks later.

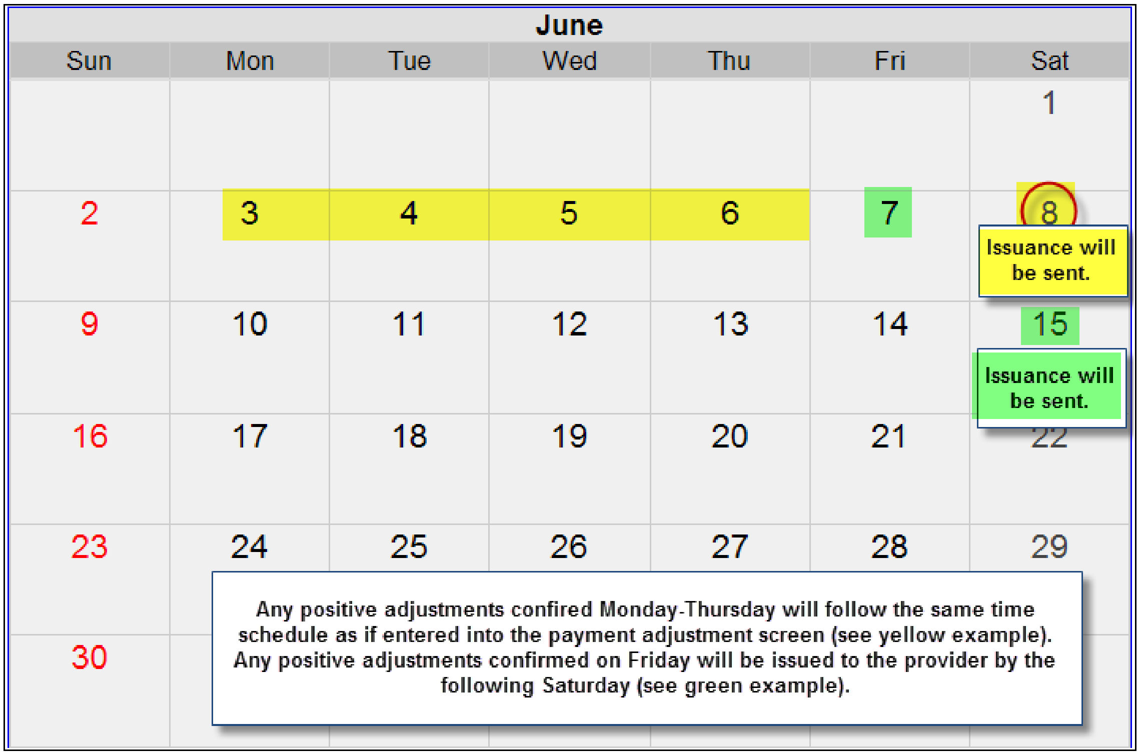
This calendar displays in yellow what will occur if adjustments are confirmed Monday – Thursday and in green if adjustments are confirmed on Friday.



Issuance of Positive Adjustments

- **Manual adjustments.** A positive adjustment is entered on the Payment Adjustment Screen on Monday – Saturday. The issuance will be sent on Saturday of that week.
- **Confirmed in PIES**. A positive adjustment is confirmed in PIES Monday – Thursday. The issuance will be sent on Saturday of that week. If a positive adjustment is confirmed on Friday, the issuance will be sent the following Saturday.

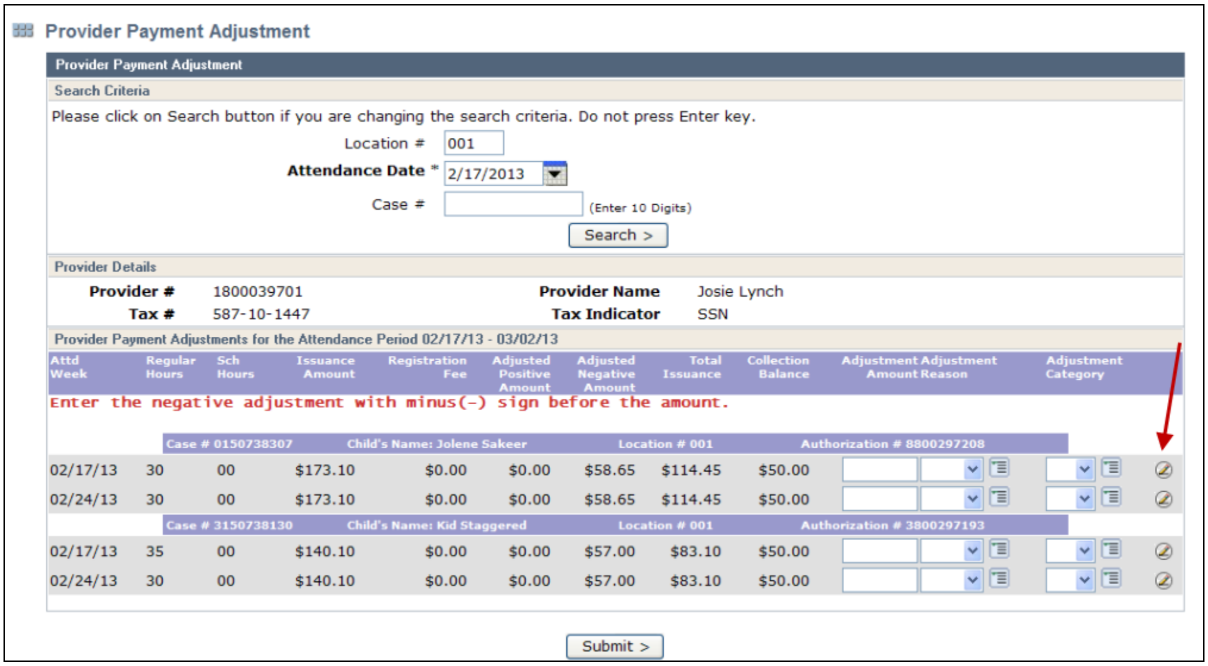
This calendar displays in yellow what will occur if adjustments are confirmed Monday – Thursday and in green if adjustments are confirmed on Friday.



Modifications to Confirmed Provider Adjustments

- Modifications to confirmed Provider Negative Adjustments can be completed until the amount is recouped from the provider.
- Modifications to confirmed Provider Positive Adjustments can be completed until the amount is issued to the provider.

Any confirmed adjustments can be altered or deleted in the **Provider Payment Adjustments** screen by selecting the edit icon.



Provider Payment Adjustment

Provider Payment Adjustment

Search Criteria

Please click on Search button if you are changing the search criteria. Do not press Enter key.

Location # 001

Attendance Date * 2/17/2013

Case # (Enter 10 Digits)

Search >

Provider Details

Provider # 1800039701 Provider Name Josie Lynch

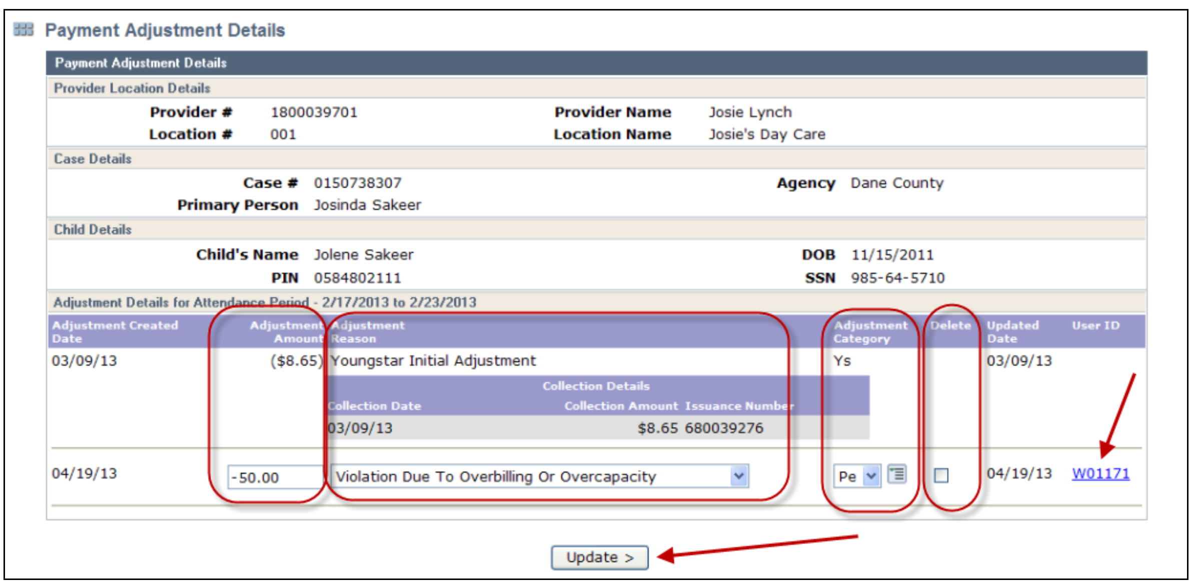
Tax # 587-10-1447 Tax Indicator SSN

Provider Payment Adjustments for the Attendance Period 02/17/13 - 03/02/13

Attd Week	Regular Hours	Sch Hours	Issuance Amount	Registration Fee	Adjusted Positive Amount	Adjusted Negative Amount	Total Issuance	Collection Balance	Adjustment Amount	Adjustment Reason	Adjustment Category	
Enter the negative adjustment with minus(-) sign before the amount.												
Case # 0150738307 Child's Name: Jolene Sakeer Location # 001 Authorization # 8800297208												
02/17/13	30	00	$173.10	$0.00	$0.00	$58.65	$114.45	$50.00				
02/24/13	30	00	$173.10	$0.00	$0.00	$58.65	$114.45	$50.00				
Case # 3150738130 Child's Name: Kid Staggered Location # 001 Authorization # 3800297193												
02/17/13	35	00	$140.10	$0.00	$0.00	$57.00	$83.10	$50.00				
02/24/13	30	00	$140.10	$0.00	$0.00	$57.00	$83.10	$50.00				

Submit >

In the **Payment Adjustment Details** screen you can modify the Adjustment Amount, Adjustment Reason, Adjustment Category or Delete the adjustment by checking the box. You can also select the User ID link to view who confirmed or manually entered the adjustment. Select Update, when changes have been completed.



Payment Adjustment Details

Payment Adjustment Details

Provider Location Details

Provider # 1800039701 Provider Name Josie Lynch

Location # 001 Location Name Josie's Day Care

Case Details

Case # 0150738307 Agency Dane County

Primary Person Josinda Sakeer

Child Details

Child's Name Jolene Sakeer DOB 11/15/2011

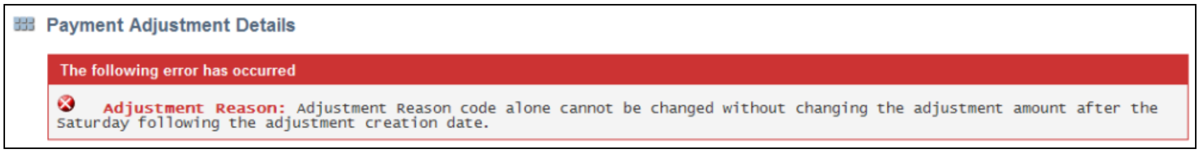
PIN 0584802111 SSN 985-64-5710

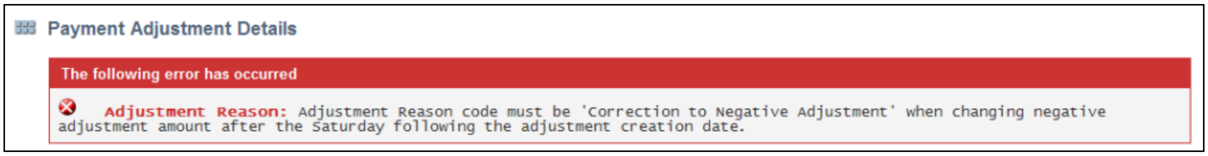
Adjustment Details for Attendance Period - 2/17/2013 to 2/23/2013

Adjustment Created Date	Adjustment Amount	Adjustment Reason	Adjustment Category	Delete	Updated Date	User ID
03/09/13	($8.65)	Youngstar Initial Adjustment	Ys		03/09/13	
		Collection Details: Collection Date 03/09/13; Collection Amount $8.65; Issuance Number 680039276				
04/19/13	-50.00	Violation Due To Overbilling Or Overcapacity	Pe		04/19/13	W01171

Update >

After the Saturday following the Adjustment Created Date, the Adjustment Reason code can only be changed to the Correction to Negative Adjustment and the Adjustment Amount must also be changed. Otherwise you will get the following error messages.





Contact Information

Questions regarding this material can be directed to Rose Prochazka at Rose.Prochazka@wisconsin.gov or (608) 422-6078.

Questions regarding policy in Child Care Policy Manual Chapters 1 and 3 can be directed to the Child Care Help Desk at childcare@wisconsin.gov or (608) 264-1657.

Questions regarding policy in Child Care Policy Manual Chapter 2 can be directed to Marcie Stebbeds at marcie.stebbeds@wisconsin.gov or (608) 261-5850.

Questions regarding security should be directed via your security liaison to the DCF Security Help Desk at: (608) 264-6323.

Child Care Policy Manuals can be viewed online at: http://dcf.wisconsin.gov/chilcare/wishares/manual.htm

CSAW can be accessed online at: https://www.dwd.state.wi.us/dwscsaw/Default.aspx

DCF is an equal opportunity employer and service provider. If you have a disability and need information in an alternate format, or need it translated to another language, please call 608-422-6080 or 888-692-1382 (TTY). For civil rights questions, call 608-422-6889 or 711 (TTY).